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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ABACAVIR SULFATE 300 MG TAB	0000	4.94966	02/05/2016
ACAMPROSATE CALCIUM 333 MG TAB DR	0000	1.07161	11/05/2015
ACARBOSE 100 MG TAB	0000	0.47754	11/05/2015
ACARBOSE 25 MG TAB	0000	0.41100	08/05/2015
ACARBOSE 50 MG TAB	0000	0.41943	08/05/2015
ACEBUTOLOL 200 MG CAP	0000	0.27341	08/05/2015
ACEBUTOLOL 400 MG CAP	0000	0.45730	09/05/2015
ACETAMINOPHEN WITH CODEINE 120-12MG/5 SOLUTION	0000	0.01925	08/05/2015
ACETAMINOPHEN/COD 300/15 MG TAB	0000	0.15855	02/05/2016
ACETAMINOPHEN/COD 300/30 MG TAB	0000	0.17595	01/05/2016
ACETAMINOPHEN/COD 300/60 MG TAB	0000	0.32850	04/05/2016
ACETAZOLAMIDE 250 MG TAB	0000	2.50788	12/05/2015
ACETAZOLAMIDE 500 MG CAP	0000	3.46482	09/05/2015
ACETIC ACID 0.25% IRRIG SOLN	0000	0.00460	03/05/2015
ACETIC ACID 2 % SOLN	0000	2.17329	03/05/2016
ACETIC ACID/HYDROCORTISONE 2 %-1 % DROPS	0000	11.77588	02/05/2016
ACETYLCYSTEINE 10% VIAL	0000	0.58340	03/05/2015
ACETYLCYSTEINE 20% VIAL	0000	0.46316	08/05/2015
ACITRETIN 10 MG CAPSULE	0000	23.41220	04/05/2016
ACITRETIN 25 MG CAP	0000	27.63712	03/05/2016
ACYCLOVIR 200 MG CAP	0000	0.13050	08/05/2015
ACYCLOVIR 200 MG/5 ML SUSP	0000	0.57820	03/05/2016
ACYCLOVIR 400 MG TAB	0000	0.13150	08/05/2015
ACYCLOVIR 5 % OINT. (G)	0000	16.79756	04/05/2016
ACYCLOVIR 800 MG TAB	0000	0.26168	08/05/2015
ALBUTEROL 0.83 MG/ML SOLN	0000	0.05616	08/05/2015
ALBUTEROL 2.5 MG/0.5 ML SOL	0000	0.45520	11/05/2015
ALBUTEROL 5 MG/ML SOLN	0000	0.68688	12/05/2015
ALBUTEROL SUL 1.25 MG/3 ML SOLN	0000	0.40410	08/05/2015
ALBUTEROL SULF 2 MG/5 ML SYRP	**0000**	**0.01855**	**05/05/2016**
ALBUTEROL SULFATE 0.63MG/3ML VIAL-NEB	0000	0.42041	08/05/2015
ALBUTEROL SULFATE 2 MG TAB	0000	4.56628	01/05/2016
ALBUTEROL SULFATE 4 MG TAB	0000	5.33350	02/05/2016
ALBUTEROL SULFATE ER 4 MG TAB	0000	1.50200	09/05/2015
ALCLOMETASONE DIP 0.05% CRM	0000	1.70400	03/05/2015
ALCLOMETASONE DIP 0.05% OINT	0000	1.74178	10/05/2015
ALENDRONATE SODIUM 10 MG TAB	0000	0.26801	08/05/2015
ALENDRONATE SODIUM 35 MG TAB	0000	0.81578	04/05/2016
ALENDRONATE SODIUM 5 MG TAB	0000	0.21200	11/05/2015
ALENDRONATE SODIUM 70 MG TAB	0000	0.50942	08/05/2015
ALFUZOSIN HCL 10 MG TAB ER 24H	0000	0.27267	08/05/2015
ALLOPURINOL 100 MG TAB	0000	0.25500	10/05/2015
ALLOPURINOL 300 MG TAB	0000	0.25271	09/05/2015
ALMOTRIPTAN MALATE 12.5 MG TAB	**0000**	**33.80484**	**05/05/2016**
ALOSETRON HCL 1 MG TAB	**0000**	**45.81880**	**05/05/2016**
ALPRAZOLAM 0.25 MG TAB	**0000**	**0.02774**	**05/05/2016**
ALPRAZOLAM 0.5 MG ODT	0000	1.97565	08/05/2015
ALPRAZOLAM 0.5 MG TAB	0000	0.02564	08/05/2015
ALPRAZOLAM 1 MG ODT	0000	2.58435	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ALPRAZOLAM 1 MG TAB	0000	0.03014	08/05/2015
ALPRAZOLAM 2 MG TAB	**0000**	**0.05850**	**05/05/2016**
ALPRAZOLAM XR 0.5 MG TAB	0000	0.39263	08/05/2015
ALPRAZOLAM XR 1 MG TAB	0000	0.74777	04/05/2016
ALPRAZOLAM XR 2 MG TAB	0000	0.78992	04/05/2016
ALPRAZOLAM XR 3 MG TAB	0000	1.01134	04/05/2016
AMANTADINE 100 MG CAP	0000	1.67160	08/05/2015
AMANTADINE 100 MG TAB	0000	1.90909	11/05/2015
AMANTADINE 50 MG/5 ML SYRP	0000	0.02907	12/05/2015
AMILORIDE HCL 5 MG TAB	0000	0.57486	11/05/2015
AMILORIDE HCL/HCTZ 5/50 MG TAB	0000	0.50807	09/05/2015
AMIODARONE HCL 100 MG TAB	**0000**	**3.57821**	**05/05/2016**
AMIODARONE HCL 200 MG TAB	**0000**	**0.17700**	**05/05/2016**
AMIODARONE HCL 400 MG TAB	0000	4.47040	02/05/2016
AMITRIPTYLINE HCL 10 MG TAB	**0000**	**0.17562**	**05/05/2016**
AMITRIPTYLINE HCL 100 MG TAB	**0000**	**1.12493**	**05/05/2016**
AMITRIPTYLINE HCL 150 MG TAB	**0000**	**1.94400**	**05/05/2016**
AMITRIPTYLINE HCL 25 MG TAB	0000	0.31890	08/05/2015
AMITRIPTYLINE HCL 50 MG TAB	0000	0.63855	08/05/2015
AMITRIPTYLINE HCL 75 MG TAB	0000	0.89424	12/05/2015
AMLODIPINE BESYLATE 10 MG TAB	0000	0.02249	08/05/2015
AMLODIPINE BESYLATE 2.5 MG TAB	**0000**	**0.01901**	**05/05/2016**
AMLODIPINE BESYLATE 5 MG TAB	**0000**	**0.02216**	**05/05/2016**
AMLODIPINE-ATORVAST 5-40 MG TAB	0000	6.06613	02/05/2016
AMLODIPINE-BENAZEPRIL 10-40 MG CAP	0000	0.45800	08/05/2015
AMLODIPINE-BENAZEPRIL 10/20 MG CAP	0000	0.50563	08/05/2015
AMLODIPINE-BENAZEPRIL 2.5/10 MG CAP	0000	0.72660	08/05/2015
AMLODIPINE-BENAZEPRIL 5-40 MG CAP	0000	0.52965	08/05/2015
AMLODIPINE-BENAZEPRIL 5/10 MG CAP	0000	0.60405	08/05/2015
AMLODIPINE-BENAZEPRIL 5/20 MG CAP	0000	0.43363	08/05/2015
AMLODIPINE/ATORVASTATIN 10 MG-10 MG TAB	**0000**	**5.29950**	**05/05/2016**
AMLODIPINE/ATORVASTATIN 10 MG-20 MG TAB	**0000**	**5.93785**	**05/05/2016**
AMLODIPINE/ATORVASTATIN 10 MG-40 MG TAB	**0000**	**6.26923**	**05/05/2016**
AMLODIPINE/ATORVASTATIN 5 MG-10 MG TAB	0000	4.71714	03/05/2016
AMLODIPINE/ATORVASTATIN 5 MG-20 MG TAB	0000	5.80909	02/05/2016
AMMONIUM LACTATE 12% CRM	0000	0.10640	08/05/2015
AMMONIUM LACTATE 12% LOT	0000	0.10761	08/05/2015
AMOX TR-K CLV 200-28.5 MG/5ML SUSP	0000	0.15510	08/05/2015
AMOX TR-K CLV 200-28.5 TAB CHW	0000	2.32040	03/05/2015
AMOX TR-K CLV 250-125 MG TAB	**0000**	**4.47258**	**05/05/2016**
AMOX TR-K CLV 250-62.5/5 SUSP	0000	0.64233	08/05/2015
AMOX TR-K CLV 400-57 MG TAB CHEW	0000	3.48644	04/05/2016
AMOX TR-K CLV 400-57 MG/5 ML SUSP	**0000**	**0.12560**	**05/05/2016**
AMOX TR-K CLV 500-125 MG TAB	0000	0.66671	09/05/2015
AMOX TR-K CLV 600-42.9 MG/5 ML SUSP	0000	0.10783	08/05/2015
AMOX TR-K CLV 875-125 MG TAB	0000	0.65709	08/05/2015
AMOXICILLIN 125 MG/5 ML SUSP	0000	0.02520	08/05/2015
AMOXICILLIN 200 MG/5 ML SUSP	**0000**	**0.04741**	**05/05/2016**
AMOXICILLIN 250 MG CAP	0000	0.10536	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
AMOXICILLIN 250 MG TAB CHEW	0000	0.33573	08/05/2015
AMOXICILLIN 250 MG/5 ML SUSP	0000	0.02416	08/05/2015
AMOXICILLIN 400 MG/5 ML SUSP	0000	0.03210	03/05/2016
AMOXICILLIN 500 MG CAP	0000	0.07446	08/05/2015
AMOXICILLIN 875 MG TAB	0000	0.19079	02/05/2016
AMOXICILLIN-CLAV ER 1,000-62.5 TAB	**0000**	**3.72400**	**05/05/2016**
AMPHETAMINE SALTS 10 MG TAB	0000	1.02147	03/05/2016
AMPHETAMINE SALTS 12.5 MG TAB	0000	1.06600	11/05/2015
AMPHETAMINE SALTS 15 MG TAB	0000	1.39318	01/05/2016
AMPHETAMINE SALTS 20 MG TAB	0000	0.82779	08/05/2015
AMPHETAMINE SALTS 30 MG TAB	0000	0.88643	10/05/2015
AMPHETAMINE SALTS 5 MG TAB	0000	0.74925	04/05/2016
AMPHETAMINE SALTS 7.5 MG TAB	0000	0.97850	03/05/2015
AMPICILLIN TR 250 MG CAP	0000	0.11483	08/05/2015
AMPICILLIN TR 500 MG CAP	0000	0.18405	08/05/2015
AMPICILLIN-SULBACTAM 3 GM VIAL	0000	5.62800	03/05/2015
ANAGRELIDE HCL 0.5 MG CAP	0000	0.97500	09/05/2014
ANAGRELIDE HCL 1 MG CAP	**0000**	**1.71840**	**05/05/2016**
ANASTROZOLE 1 MG TAB	0000	0.13896	08/05/2015
ANTIPYRINE-BENZOCAINE EAR DROPS	0000	0.61282	09/05/2015
APAP-BUTALBITAL 325/50 MG TAB	0000	1.84744	09/05/2015
ASA/BUTALB/CAFF/COD 325/50/40/30 MG CAP	0000	2.20995	09/05/2015
ASPIRIN 81 MG TAB CHEW	0000	0.02354	11/05/2015
ASPIRIN 81 MG TAB DR	0000	0.00846	11/05/2015
ATENOLOL 100 MG TAB	0000	0.03900	08/05/2015
ATENOLOL 25 MG TAB	0000	0.01821	08/05/2015
ATENOLOL 50 MG TAB	0000	0.02388	08/05/2015
ATENOLOL/CHLORTHALIDONE 100/25 MG TAB	0000	0.71915	09/05/2015
ATENOLOL/CHLORTHALIDONE 50/25 MG TAB	0000	0.54034	11/05/2015
ATORVASTATIN CALCIUM 10 MG TAB	0000	0.16047	08/05/2015
ATORVASTATIN CALCIUM 20 MG TAB	0000	0.18995	09/05/2015
ATORVASTATIN CALCIUM 40 MG TAB	0000	0.20620	09/05/2015
ATORVASTATIN CALCIUM 80 MG TAB	0000	0.21658	09/05/2015
ATOVAQUONE 750 MG/5ML ORAL SUSP	0000	4.40657	04/05/2016
ATOVAQUONE/PROGUANIL HCL 250 MG-100 MG TAB	0000	6.04938	01/05/2016
AZATHIOPRINE 50 MG TAB	0000	0.53568	09/05/2015
AZELASTINE 137 MCG NASAL SPRY	0000	1.26106	11/05/2015
AZELASTINE HCL 0.05 % DROPS	0000	5.57238	03/05/2016
AZELASTINE HCL 205.5MCG SPRAY/PUMP	0000	3.73910	11/05/2015
AZITHROMYCIN 100 MG/5 ML SUSP	0000	1.53918	08/05/2015
AZITHROMYCIN 200 MG/5 ML SUSP	0000	0.71118	08/05/2015
AZITHROMYCIN 250 MG TAB	0000	0.61772	02/05/2016
AZITHROMYCIN 500 MG TAB	0000	1.16691	08/05/2015
AZITHROMYCIN 600 MG TAB	**0000**	**2.72980**	**05/05/2016**
BAC/POLYMYX B SULF 500U-10,000U/GM OINT	0000	0.32454	10/05/2015
BACITRACIN-POLYMYXIN OINT	0000	5.97070	03/05/2016
BACLOFEN 10 MG TAB	0000	0.24780	08/05/2015
BACLOFEN 20 MG TAB	0000	0.42285	08/05/2015
BALSALAZIDE DISODIUM 750 MG CAP	0000	0.77481	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
BENAZEPRIL HCL 10 MG TAB	0000	0.05556	08/05/2015
BENAZEPRIL HCL 20 MG TAB	0000	0.06414	08/05/2015
BENAZEPRIL HCL 40 MG TAB	0000	0.08089	08/05/2015
BENAZEPRIL HCL 5 MG TAB	0000	0.06990	08/05/2015
BENAZEPRIL/HCTZ 10/12.5 MG TAB	0000	1.92971	11/05/2015
BENAZEPRIL/HCTZ 20/12.5 MG TAB	0000	1.45035	12/05/2015
BENAZEPRIL/HCTZ 20/25 MG TAB	0000	1.70194	12/05/2015
BENAZEPRIL/HCTZ 5/6.25 MG TAB	0000	1.69356	11/05/2015
BENZONATATE 100 MG CAP	0000	0.27600	05/22/2015
BENZOYL PEROXIDE 4 % CLEANSER	0000	0.05130	03/05/2015
BENZTROPINE MES 0.5 MG TAB	0000	0.14440	08/05/2015
BENZTROPINE MES 1 MG TAB	0000	0.13854	08/05/2015
BENZTROPINE MES 2 MG TAB	0000	0.20700	08/05/2015
BETAMET DIPROP/PROP GLY 0.05% LOT	0000	2.95700	08/05/2015
BETAMETHASONE DP 0.05% AUGMTD CRM	0000	0.31028	09/05/2015
BETAMETHASONE DP 0.05% AUGMTD OINT	0000	2.80140	08/05/2015
BETAMETHASONE DP 0.05% CRM	0045	2.10152	09/05/2015
BETAMETHASONE DP 0.05% CRM	0015	2.92506	03/05/2016
BETAMETHASONE DP 0.05% LOT	0000	0.85031	08/05/2015
BETAMETHASONE DP 0.05% OINT	0045	2.11792	03/05/2016
BETAMETHASONE DP 0.05% OINT	0015	2.59840	03/05/2015
BETAMETHASONE VA 0.1% CRM	0000	1.00271	09/05/2015
BETAMETHASONE VA 0.1% LOT	0060	0.99337	04/05/2016
BETAMETHASONE VA 0.1% OINT	0000	1.10667	08/05/2015
BETAMETHASONE VALERATE 0.12 % FOAM	0000	7.32439	08/05/2015
BETHANECHOL 10 MG TAB	0000	0.47858	08/05/2015
BETHANECHOL 25 MG TAB	0000	0.72473	08/05/2015
BETHANECHOL 5 MG TAB	0000	0.37485	11/05/2015
BETHANECHOL CHLORIDE 50 MG TAB	0000	1.72335	08/05/2015
BICALUTAMIDE 50 MG TAB	0000	0.29750	08/05/2015
BISOPROLOL FUMARATE 10 MG TAB	0000	0.45590	08/05/2015
BISOPROLOL FUMARATE 5 MG TAB	0000	0.46448	08/05/2015
BISOPROLOL/HCTZ 10/6.25 MG TAB	**0000**	**0.11624**	**05/05/2016**
BISOPROLOL/HCTZ 2.5/6.25 MG TAB	0000	0.16100	08/05/2015
BISOPROLOL/HCTZ 5/6.25 MG TAB	0000	0.10274	08/05/2015
BRIMONIDINE 0.2% EYE DROPS	**0000**	**0.92857**	**05/05/2016**
BROMFENAC SODIUM 0.09% EYE DROPS	0000	58.76366	04/05/2016
BROMOCRIPTINE 2.5 MG TAB	0000	4.23525	08/05/2015
BROMOCRIPTINE 5 MG CAP	**0000**	**8.05301**	**05/05/2016**
BUDESONIDE 32 MCG SPRY/PUMP	**0000**	**13.28433**	**05/05/2016**
BUDESONIDE EC 3 MG CAP	0000	12.08511	02/05/2016
BUMETANIDE 0.5 MG TAB	0000	0.85790	11/05/2015
BUMETANIDE 1 MG TAB	0000	0.71849	09/05/2015
BUMETANIDE 2 MG TAB	0000	1.20572	11/05/2015
BUPRENORPHINE HCL 2 MG TAB SL	0000	1.59552	11/05/2015
BUPRENORPHINE HCL 8 MG TAB SL	0000	2.69582	11/05/2015
BUPRENORPHINE HCL/NALOXONE HCL 2 MG-0.5MG TAB SUBL	**0000**	**4.20791**	**05/05/2016**
BUPRENORPHINE HCL/NALOXONE HCL 8 MG-2 MG TAB SUBL	**0000**	**7.16811**	**05/05/2016**
BUPROPION HCL 100 MG TAB	0000	0.55459	09/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
BUPROPION HCL 75 MG TAB	0000	0.53959	11/05/2015
BUPROPION HCL ER 100 MG TAB	0000	0.27105	08/05/2015
BUPROPION HCL ER 200 MG TAB	0000	0.47945	09/05/2015
BUPROPION HCL SR 150 MG TAB - AB1	0000	0.16223	08/05/2015
BUPROPION HCL SR 150 MG TAB - AB2	0000	0.46054	03/05/2016
BUPROPION XL 150MG TAB	0000	0.65181	09/05/2015
BUPROPION XL 300 MG TAB	0000	0.79290	09/05/2015
BUSPIRONE HCL 10 MG TAB	0000	0.07650	08/05/2015
BUSPIRONE HCL 15 MG TAB	0000	0.09098	08/05/2015
BUSPIRONE HCL 30 MG TAB	0000	0.61583	09/05/2015
BUSPIRONE HCL 5 MG TAB	0000	0.05058	08/05/2015
BUSPIRONE HCL 7.5 MG TAB	0000	0.96701	11/05/2015
BUTALBITAL/APAP/CAFF 50/325/40 MG TAB	0000	0.88845	11/05/2015
BUTALBITAL/ASA/CAFF 50/325/40 MG CAP	0000	1.54205	08/05/2015
BUTALBITAL/CAF/APAP/COD 50/40/325/30 MG CAP	0000	1.25442	12/05/2015
BUTORPHANOL 10 MG/ML SPRY	0000	20.46298	02/05/2016
CABERGOLINE 0.5 MG TAB	**0000**	**11.42034**	**05/05/2016**
CALCIPOTRIENE 0.005 % CREAM (G)	0000	5.01075	12/05/2015
CALCIPOTRIENE/BETAMETHASONE 0.005-.064 OINT. (G)	0000	11.11931	04/05/2016
CALCITRIOL 0.25 MCG CAP	0000	0.49831	09/05/2015
CALCITRIOL 0.5 MCG CAP	0000	1.32855	08/05/2015
CALCITRIOL 1 MCG/ML SOLN	0000	7.38230	11/05/2015
CALCIUM ACETATE 667 MG CAP	0000	0.49913	08/05/2015
CANDESARTAN CILEXETIL 16 MG TAB	0000	2.78977	11/05/2015
CANDESARTAN CILEXETIL 32 MG TAB	0000	3.40773	11/05/2015
CANDESARTAN CILEXETIL 8 MG TAB	0000	2.74751	08/05/2015
CANDESARTAN/HCTZ 16 MG-12.5 MG TAB	0000	2.67800	11/05/2015
CANDESARTAN/HCTZ 32 MG/12.5 MG TAB	**0000**	**2.20378**	**05/05/2016**
CAPECITABINE 500 MG TABLET	0000	27.99924	04/05/2016
CAPTOPRIL 100 MG TAB	0000	3.21209	11/05/2015
CAPTOPRIL 12.5 MG TAB	0000	1.16446	11/05/2015
CAPTOPRIL 25 MG TAB	0000	1.33347	11/05/2015
CAPTOPRIL 50 MG TAB	0000	1.95663	03/05/2016
CAPTOPRIL/HCTZ 50/15 MG TAB	0000	2.40525	08/05/2015
CARBAMAZEPINE 100 MG CPMP 12HR	0000	1.55615	12/05/2015
CARBAMAZEPINE 100 MG TAB CHEW	0000	0.47868	08/05/2015
CARBAMAZEPINE 100 MG/5 ML SUSP	0000	0.14936	04/05/2016
CARBAMAZEPINE 200 MG CPMP 12HR	0000	1.42210	08/05/2015
CARBAMAZEPINE 200 MG TAB	0000	0.89702	08/05/2015
CARBAMAZEPINE 200 MG TAB SR 12H	0000	2.41199	03/05/2016
CARBAMAZEPINE 400 MG TAB SR 12H	0000	4.57446	03/05/2016
CARBAMAZEPINE ER 300 MG CAP	0000	1.47459	01/05/2016
CARBIDOPA-LEVO 10-100 MG ODT	0000	1.06300	12/05/2014
CARBIDOPA-LEVODOPA-ENTA 100 MG TAB	0000	3.30867	03/05/2016
CARBIDOPA-LEVODOPA-ENTA 150 MG TAB	**0000**	**2.54331**	**05/05/2016**
CARBIDOPA-LEVODOPA-ENTA 200 MG TAB	0000	2.47875	08/05/2015
CARBIDOPA/LEVO 10/100 MG TAB	0000	0.16574	08/05/2015
CARBIDOPA/LEVO 25/100 MG TAB	0000	0.12799	08/05/2015
CARBIDOPA/LEVO 25/100 MG TAB RAPDIS	0000	1.18920	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CARBIDOPA/LEVO 25/100 MG TAB SA	0000	0.33000	08/05/2015
CARBIDOPA/LEVO 25/250 MG TAB	0000	0.28593	08/05/2015
CARBIDOPA/LEVO 50/200 MG TAB SA	0000	0.69180	08/05/2015
CARBINOXAMINE MALEATE 4 MG TAB	0000	0.60375	08/05/2015
CARBINOXAMINE MALEATE 4 MG/5 ML LIQUID	0000	0.15368	08/05/2015
CARBOPLATIN 50 MG/5 ML VIAL	0000	1.73240	06/05/2015
CARISOPRODOL 350 MG TAB	**0000**	**0.08546**	**05/05/2016**
CARTEOLOL HCL 1% EYE DROPS	0000	1.35000	06/05/2015
CARVEDILOL 12.5 MG TAB	0000	0.03726	08/05/2015
CARVEDILOL 25 MG TAB	0000	0.04902	12/05/2015
CARVEDILOL 3.125 MG TAB	0000	0.03627	08/05/2015
CARVEDILOL 6.25 MG TAB	0000	0.03600	08/05/2015
CDP/AMITRIP 10/25 MG TAB	0000	2.01192	08/05/2015
CDP/AMITRIP 5/12.5 MG TAB	0000	1.47076	08/05/2015
CEFACLOR 500 MG CAP	0000	2.04567	09/05/2015
CEFADROXIL 250 MG/5 ML SUSP	0000	0.38775	11/05/2015
CEFADROXIL 500 MG CAP	0000	0.36946	09/05/2015
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**	**0.48625**	**05/05/2016**
CEFDINIR 250 MG/5 ML SUSP	0000	0.49875	08/05/2015
CEFDINIR 300 MG CAP	0000	1.13971	08/05/2015
CEFEPIME HCL 2 GRAM VIAL	0000	10.29000	12/05/2014
CEFPODOXIME 200 MG TAB	0000	7.87905	01/05/2016
CEFPROZIL 125 MG/5 ML SUSP	0000	0.33740	08/05/2015
CEFPROZIL 250 MG TAB	**0000**	**1.04480**	**05/05/2016**
CEFPROZIL 250 MG/5 ML SUSP	**0000**	**0.71430**	**05/05/2016**
CEFPROZIL 500 MG TAB	0000	2.20670	02/05/2016
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	2.02150	08/05/2015
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	1.61834	03/05/2016
CEFTRIAXONE 500 MG VIAL	0000	1.89000	06/05/2015
CEFUROXIME AXETIL 250 MG TAB	0000	1.88089	12/05/2015
CEFUROXIME AXETIL 500 MG TAB	0000	3.57295	11/05/2015
CEPHALEXIN 125 MG/5 ML SUSP	0000	0.19478	08/05/2015
CEPHALEXIN 250 MG CAP	**0000**	**0.12855**	**05/05/2016**
CEPHALEXIN 250 MG/5 ML SUSP	0000	0.22229	08/05/2015
CEPHALEXIN 500 MG CAP	0000	0.10687	08/05/2015
CETIRIZINE 1 MG/ML SOLN	0000	0.03083	08/05/2015
CETIRIZINE 5 MG TAB	0000	0.10315	08/05/2015
CETIRIZINE HCL 10 MG TAB	0000	0.06011	09/05/2015
CETIRIZINE HCL/PSEUDOEPHEDRINE 5-120MG TAB ER 12H	0000	0.72870	03/05/2015
CEVIMELINE HCL 30 MG CAP	0000	2.84700	08/05/2015
CHLORDIAZEPOXIDE 10 MG CAP	0000	0.10060	08/05/2015
CHLORDIAZEPOXIDE 25 MG CAP	0000	0.10479	08/05/2015
CHLORDIAZEPOXIDE 5 MG CAP	0000	0.13865	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CHLORHEXIDINE 0.12% RINSE	0000	0.00674	09/05/2015
CHLORTHALIDONE 25 MG TAB	0000	1.37826	09/05/2015
CHLORZOXAZONE 500 MG TAB	0000	0.30440	08/05/2015
CHOLESTYRAMINE LIGHT PWDR - PREVALITE	0000	0.36726	08/05/2015
CHOLESTYRAMINE PWDR -QUESTRAN	0000	0.30989	08/05/2015
CHOLESTYRAMINE/ASPARTAME 4 GRAM PK	0000	2.92025	08/05/2015
CHOLESTYRAMINE/SUCROSE 4 GRAM PK	0000	2.57525	08/05/2015
CICLOPIROX 0.77 % GEL	**0000**	**2.25579**	**05/05/2016**
CICLOPIROX 0.77% CRM	0000	0.36281	08/05/2015
CICLOPIROX 1 % SHAMPOO	0000	1.00141	03/05/2016
CICLOPIROX 8% SOLN	**0000**	**4.29957**	**05/05/2016**
CILOSTAZOL 100 MG TAB	0000	0.16425	08/05/2015
CILOSTAZOL 50 MG TAB	0000	0.19286	08/05/2015
CIMETIDINE 200 MG TAB	0000	0.38450	08/05/2015
CIMETIDINE 300 MG TAB	0000	0.45040	11/05/2015
CIMETIDINE 300 MG/5 ML SOLN	0000	0.07931	04/05/2016
CIMETIDINE 400 MG TAB	0000	0.67210	01/05/2016
CIMETIDINE 800 MG TAB	0000	1.48977	03/05/2016
CIPROFLOXACIN 0.3% EYE DROPS	**0000**	**1.20300**	**05/05/2016**
CIPROFLOXACIN HCL 250 MG TAB	**0000**	**0.16961**	**05/05/2016**
CIPROFLOXACIN HCL 500 MG TAB	0000	0.19492	08/05/2015
CIPROFLOXACIN HCL 750 MG TAB	0000	0.41161	09/05/2015
CITALOPRAM 10 MG/5 ML SOLN	0000	0.31507	09/05/2015
CITALOPRAM HBR 10 MG TAB	**0000**	**0.03723**	**05/05/2016**
CITALOPRAM HBR 20 MG TAB	0000	0.04347	08/05/2015
CITALOPRAM HBR 40 MG TAB	0000	0.04326	08/05/2015
CLADRIBINE 10 MG/10ML VIAL	0000	38.59500	06/05/2015
CLARITHROMYCIN 125MG/ML SUSP	0000	0.52824	04/05/2016
CLARITHROMYCIN 250 MG TAB	0000	2.58150	02/05/2016
CLARITHROMYCIN 250MG/ML SUSP	0000	0.88060	12/05/2015
CLARITHROMYCIN 500 MG TAB	0000	1.32197	11/05/2015
CLARITHROMYCIN ER 500 MG TAB	0000	4.05875	08/05/2015
CLEMASTINE FUM 2.68 MG TAB	0000	0.61092	08/05/2015
CLINDAMYCIN 2% VAG CRM	0000	2.43410	03/05/2016
CLINDAMYCIN HCL 150 MG CAP	0000	0.11142	09/05/2015
CLINDAMYCIN HCL 300 MG CAP	0000	0.38873	08/05/2015
CLINDAMYCIN PALM HCL 75 MG/5 ML SOLN RECON	0000	0.43459	12/05/2015
CLINDAMYCIN PH 1% GEL	0000	2.21245	11/05/2015
CLINDAMYCIN PH 1% LOT	0000	1.63830	11/05/2015
CLINDAMYCIN PH 1% SOLN	0000	1.00050	11/05/2015
CLINDAMYCIN PH 150 MG/ML VIAL	0000	0.92310	03/05/2015
CLINDAMYCIN PHOSPHATE 1% FOAM	0000	4.77000	03/05/2015
CLOBETASOL 0.05% CRM	0000	4.87826	08/05/2015
CLOBETASOL 0.05% GEL	0000	7.54976	08/05/2015
CLOBETASOL 0.05% OINT	0000	5.59344	11/05/2015
CLOBETASOL 0.05% SOLN	0000	2.41631	09/05/2015
CLOBETASOL EMOLLIENT 0.05% CRM	0000	3.55226	08/05/2015
CLOBETASOL PROPIONATE 0.05 % FOAM	0000	6.56700	08/05/2015
CLOBETASOL PROPIONATE 0.05 % LOTION	0000	4.68239	01/05/2016

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
CLOBETASOL PROPIONATE 0.05 % SHAMPOO	0000	2.33472	09/05/2015
CLOBETASOL PROPIONATE 0.05 % SPRAY	0000	6.69618	03/05/2016
CLOMIPRAMINE 25 MG CAP	**0000**	**8.81189**	**05/05/2016**
CLOMIPRAMINE 50 MG CAP	0000	11.17346	02/05/2016
CLOMIPRAMINE 75 MG CAP	0000	8.15496	04/05/2016
CLONAZEPAM 0.125 MG DIS TAB	0000	0.82454	09/05/2015
CLONAZEPAM 0.25 MG DIS TAB	0000	0.81167	12/05/2015
CLONAZEPAM 0.5 MG DIS TAB	0000	0.80475	12/05/2015
CLONAZEPAM 0.5 MG TAB	0000	0.02109	08/05/2015
CLONAZEPAM 1 MG DIS TAB	0000	1.31051	08/05/2015
CLONAZEPAM 1 MG TAB	0000	0.03155	08/05/2015
CLONAZEPAM 2 MG TAB	0000	0.04479	08/05/2015
CLONIDINE HCL 0.1 MG TAB	**0000**	**0.03087**	**05/05/2016**
CLONIDINE HCL 0.1 MG TAB ER 12H	0000	3.59320	11/05/2015
CLONIDINE HCL 0.2 MG TAB	**0000**	**0.05496**	**05/05/2016**
CLONIDINE HCL 0.3 MG TAB	0000	0.05809	08/05/2015
CLOPIDOGREL BISULFATE 75 MG TAB	**0000**	**0.09938**	**05/05/2016**
CLORAZEPATE 15 MG TAB	0000	0.66135	02/05/2016
CLORAZEPATE 3.75 MG TAB	0000	0.25373	02/05/2016
CLORAZEPATE 7.5 MG TAB	0000	0.32500	01/05/2016
CLOTRIMAZOLE 1% CRM	0000	0.68784	08/05/2015
CLOTRIMAZOLE 1% SOLN	0000	2.41736	10/05/2015
CLOTRIMAZOLE 10 MG TROCHE	0000	0.93385	09/05/2015
CLOTRIMAZOLE-BETAMETH CRM	0000	0.81408	09/05/2015
CLOTRIMAZOLE-BETAMETH CRM	0015	1.28982	09/05/2015
CLOTRIMAZOLE-BETAMETH LOT	0000	4.75401	04/05/2016
CLOZAPINE 100 MG TAB	0000	1.36344	08/05/2015
CLOZAPINE 200 MG TAB	0000	3.07500	11/05/2015
CLOZAPINE 25 MG TAB	0000	0.53639	09/05/2015
CLOZAPINE 50 MG TAB	0000	1.03980	11/05/2015
COLCHICINE/PROBENECID 0.5 MG-500 MG TAB	0000	0.87171	11/05/2015
COLESTIPOL HCL 1 GM TAB	0000	0.93394	08/05/2015
CROMOLYN SODIUM 20 MG/ML ORAL CONC	0000	1.11560	04/05/2016
CROMOLYN SODIUM 4% EYE DROPS	0000	0.83880	11/05/2015
CYANOCOBALAMIN 1,000 MCG/ML VIAL	**0000**	**7.35445**	**05/05/2016**
CYCLOBENZAPRINE 10 MG TAB	0000	0.02621	08/05/2015
CYCLOBENZAPRINE 5 MG TAB	0000	0.05645	08/05/2015
CYCLOPENTOLATE 1% EYE DROPS	0000	2.43308	03/05/2016
CYCLOPENTOLATE 1% EYE DROPS	0002	6.94124	03/05/2016
CYCLOSPORINE 100 MG CAP	**0000**	**9.00440**	**05/05/2016**
CYCLOSPORINE 100 MG SOFTGEL - AB1	0000	3.57909	11/05/2015
CYCLOSPORINE 100 MG/ML SOLN	**0000**	**5.11760**	**05/05/2016**
CYCLOSPORINE 25 MG CAP	0000	2.30150	11/05/2015
CYCLOSPORINE 25 MG SOFTGEL - AB1	0000	1.03616	08/05/2015
CYCLOSPORINE, MODIFIED 50 MG CAPSULE	0000	1.77250	11/05/2015
CYPROHEPTADINE 2 MG/5 ML SYRP	**0000**	**0.10135**	**05/05/2016**
CYPROHEPTADINE 4 MG TAB	0000	0.58517	08/05/2015
D-AMPHETAMINE 10 MG TAB	0000	1.74999	11/05/2015
D-AMPHETAMINE 5 MG TAB	**0000**	**1.79325**	**05/05/2016**

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DANAZOL 200 MG CAP	0000	7.09312	02/05/2016
DANTROLENE SODIUM 100 MG CAP	**0000**	**1.91865**	**05/05/2016**
DANTROLENE SODIUM 25 MG CAP	0000	1.24980	08/05/2015
DANTROLENE SODIUM 50 MG CAP	0000	1.61592	04/05/2016
DAPSONE 100 MG TAB	**0000**	**2.84056**	**05/05/2016**
DAPSONE 25 MG TAB	**0000**	**1.95709**	**05/05/2016**
DEFEROXAMINE 2 GM VIAL	0000	43.26000	12/05/2014
DEMECLOCYCLINE 150 MG TAB	**0000**	**4.31892**	**05/05/2016**
DESIPRAMINE 10 MG TAB	0000	0.91880	03/05/2015
DESIPRAMINE 100 MG TAB	0000	4.30177	03/05/2016
DESIPRAMINE 25 MG TAB	0000	1.10769	11/05/2015
DESIPRAMINE 50 MG TAB	0000	2.36250	03/05/2015
DESIPRAMINE HCL 75 MG TAB	0000	2.33220	09/05/2014
DESLORATADINE 5 MG TAB	**0000**	**0.91220**	**05/05/2016**
DESMOPRESSIN 10 MCG/0.1ML SPRY	**0000**	**22.59534**	**05/05/2016**
DESMOPRESSIN ACET 0.1 MG TAB	0000	1.20216	09/05/2015
DESMOPRESSIN ACET 0.2 MG TAB	0000	1.30168	08/05/2015
DESONIDE 0.05% CRM	0000	4.24001	08/05/2015
DESONIDE 0.05% LOT	0000	3.47072	08/05/2015
DESONIDE 0.05% OINT	0000	3.22465	12/05/2015
DESOXIMETASONE 0.05% CRM	0060	5.10608	09/05/2015
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	1.29875	08/05/2015
DESOXIMETASONE 0.25% CRM	0015	1.80780	02/05/2016
DESOXIMETASONE 0.25% OINT	0000	4.68848	09/05/2015
DESOXIMETASONE 0.25% OINT	0060	5.05046	01/05/2016
DESOXIMETASONE 0.25% OINT	0015	5.11500	03/05/2016
DEXAMETHASONE 0.1% EYE DROPS	0000	11.87154	03/05/2016
DEXAMETHASONE 0.5 MG/5 ML ELX	0000	0.26877	08/05/2015
DEXAMETHASONE 1.5 MG TAB	0000	0.11434	08/05/2015
DEXAMETHASONE SP 4 MG/ML VIAL	0000	1.84712	08/05/2015
DIAZEPAM 10 MG TAB	0000	0.02457	08/05/2015
DIAZEPAM 2 MG TAB	0000	0.02568	08/05/2015
DIAZEPAM 5 MG TAB	0000	0.02084	08/05/2015
DICLOFENAC POT 50 MG TAB	0000	0.80072	09/05/2015
DICLOFENAC SOD 50 MG TAB EC	0000	0.35070	08/05/2015
DICLOFENAC SOD 75 MG TAB EC	0000	0.21461	08/05/2015
DICLOFENAC SOD ER 100 MG TAB	**0000**	**0.49314**	**05/05/2016**
DICLOFENAC SODIUM 0.1% DROPS	0000	2.13209	01/05/2016
DICLOFENAC SODIUM 1.5 % DROPS	0000	1.44971	04/05/2016
DICLOFENAC SODIUM 25 MG TABLET DR	0000	1.48994	11/05/2015
DICLOFENAC SODIUM 3 % GEL (GRAM)	0000	8.97024	04/05/2016
DICLOFENAC SODIUM/MISOPROSTOL 75 MG-200 TAB IR DR	0000	2.87706	11/05/2015
DICLOFENAC-MISOPROST 50 MG-200 MCG TAB	0000	3.59342	08/05/2015
DICLOXACILLIN 250 MG CAP	0000	0.36398	08/05/2015
DICLOXACILLIN 500 MG CAP	0000	0.91993	04/05/2016
DICYCLOMINE 10 MG CAP	0000	0.06332	08/05/2015
DICYCLOMINE 20 MG TAB	0000	0.09503	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DIFLUNISAL 500 MG TAB	0000	1.91815	03/05/2016
DIGOXIN 125 MCG TAB	0000	0.94230	08/05/2015
DIGOXIN 250 MCG TAB	0000	1.00409	11/05/2015
DILTIAZEM 120 MG TAB	0000	0.38787	11/05/2015
DILTIAZEM 30 MG TAB	0000	0.14327	12/05/2015
DILTIAZEM 60 MG TAB	0000	0.29428	11/05/2015
DILTIAZEM 90 MG TAB	0000	0.38651	09/05/2015
DILTIAZEM ER 120 MG CAP SA	0000	3.12390	03/05/2016
DILTIAZEM ER 90 MG CAP SA	0000	2.03978	04/05/2016
DILTIAZEM HCL 120 MG CAP SA - AB2	0000	0.76815	08/05/2015
DILTIAZEM HCL 120 MG CAP SA - AB3	0000	0.33170	08/05/2015
DILTIAZEM HCL 120 MG CAP SA - AB4	0000	0.58205	11/05/2015
DILTIAZEM HCL 180 MG CAP SA - AB2	0000	0.79690	08/05/2015
DILTIAZEM HCL 180 MG CAP SA - AB3	0000	0.39645	08/05/2015
DILTIAZEM HCL 180 MG CAP SA - AB4	0000	0.68616	08/05/2015
DILTIAZEM HCL 240 MG CAP SA - AB2	0000	0.75872	08/05/2015
DILTIAZEM HCL 240 MG CAP SA - AB3	0000	0.55845	08/05/2015
DILTIAZEM HCL 240 MG CAP SA - AB4	0000	1.53401	08/05/2015
DILTIAZEM HCL 300 MG CAP SA - AB3	0000	1.12802	08/05/2015
DILTIAZEM HCL 300 MG CAP SA - AB4	0000	1.58192	01/05/2016
DILTIAZEM HCL 360 MG CAP ER 24H	0000	10.87414	03/05/2016
DILTIAZEM HCL 360 MG CAP SA - AB4	0000	1.35033	08/05/2015
DILTIAZEM HCL 420 MG CAP SA	0000	1.70772	09/05/2015
DIPHENHYDRAMINE 25 MG CAP	0000	0.02320	03/05/2015
DIPHENHYDRAMINE 50 MG CAP	0000	0.01500	06/05/2015
DIPHENHYDRAMINE 50 MG/ML VIAL	0000	1.34100	08/05/2015
DIPHENHYDRAMINE HCL 12.5 MG/5 ML LIQ	0000	0.00657	11/05/2015
DIPHENHYDRAMINE HCL 25 MG TAB (ALLERGY)	0000	0.03804	01/05/2016
DIPHENOXYLATE-ATROPINE LIQ	0000	0.18812	09/05/2015
DIPHENOXYLATE/ATROPINE 2.5/0.025 MG TAB	0000	0.46619	11/05/2015
DIPYRIDAMOLE 25 MG TAB	0000	0.14130	08/05/2015
DIPYRIDAMOLE 50 MG TAB	0000	0.29717	03/05/2016
DIPYRIDAMOLE 75 MG TAB	0000	0.45708	04/05/2016
DISOPYRAMIDE 150 MG CAP	0000	1.13040	11/05/2015
DISOPYRAMIDE PHOSPHATE 100 MG CAP	0000	1.92686	03/05/2016
DISULFIRAM 250 MG TAB	**0000**	**2.28013**	**05/05/2016**
DIVALPROEX SODIUM 125 MG CAP	0000	0.83520	08/05/2015
DIVALPROEX SODIUM 125 MG TAB DR	**0000**	**0.07124**	**05/05/2016**
DIVALPROEX SODIUM 250 MG TAB DR	0000	0.13266	08/05/2015
DIVALPROEX SODIUM 500 MG TAB DR	0000	0.23205	08/05/2015
DIVALPROEX SODIUM ER 250 MG TAB	0000	1.27127	11/05/2015
DIVALPROEX SODIUM ER 500 MG TAB	0000	1.77912	11/05/2015
DOCUSATE SODIUM 50 MG/5 ML LIQ	0000	0.01550	12/05/2014
DONEPEZIL HCL 10 MG TAB	0000	0.05867	08/05/2015
DONEPEZIL HCL 10 MG TAB RAPDIS	**0000**	**0.32985**	**05/05/2016**
DONEPEZIL HCL 23 MG TAB	**0000**	**8.40658**	**05/05/2016**
DONEPEZIL HCL 5 MG TAB	**0000**	**0.07611**	**05/05/2016**
DORZOLAMIDE HCL 2% EYE DROPS	0000	1.64608	09/05/2015
DORZOLAMIDE-TIMOLOL EYE DROPS	0000	1.71395	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
DOXAZOSIN MESYLATE 1 MG TAB	0000	0.57003	11/05/2015
DOXAZOSIN MESYLATE 2 MG TAB	0000	0.60615	08/05/2015
DOXAZOSIN MESYLATE 4 MG TAB	0000	0.63765	08/05/2015
DOXAZOSIN MESYLATE 8 MG TAB	0000	0.67208	08/05/2015
DOXEPIN 10 MG CAP	0000	0.41844	12/05/2015
DOXEPIN 100 MG CAP	0000	1.24946	08/05/2015
DOXEPIN 150 MG CAP	0000	0.96888	04/05/2016
DOXEPIN 25 MG CAP	0000	0.55054	12/05/2015
DOXEPIN 50 MG CAP	0000	0.79394	12/05/2015
DOXEPIN 75 MG CAP	0000	1.20394	09/05/2015
DOXEPIN HCL 10 MG/ML ORAL CONC	0000	0.06008	09/05/2015
DOXYCYCLINE 50 MG TAB	0000	0.70380	08/05/2015
DOXYCYCLINE HYCLATE 100 MG CAP	0000	1.53593	09/05/2015
DOXYCYCLINE HYCLATE 100 MG TAB	0000	1.51253	11/05/2015
DOXYCYCLINE HYCLATE 20 MG TAB	0000	0.42822	09/05/2015
DOXYCYCLINE HYCLATE 50 MG CAP	0000	1.46787	04/05/2016
DOXYCYCLINE MONO 100MG CAP	0000	0.65160	08/05/2015
DOXYCYCLINE MONO 50 MG CAP	0000	0.32522	02/05/2016
DOXYCYCLINE MONOHYDRATE 100 MG TAB	0000	1.00593	04/05/2016
DRONABINOL 10 MG CAP	0000	11.92376	04/05/2016
DRONABINOL 2.5 MG CAP	0000	4.64713	08/05/2015
DRONABINOL 5 MG CAP	**0000**	**5.48781**	**05/05/2016**
DULOXETINE HCL 20 MG CAP DR	0000	1.04880	11/05/2015
DULOXETINE HCL 30 MG CAP DR	**0000**	**0.44985**	**05/05/2016**
DULOXETINE HCL 40 MG CAPSULE DR	**0000**	**3.64160**	**05/05/2016**
DULOXETINE HCL 60 MG CAP DR	0000	0.58620	11/05/2015
DUTASTERIDE 0.5 MG CAP	**0000**	**0.32964**	**05/05/2016**
ECONAZOLE NITRATE 1% CRM	**0000**	**4.35993**	**05/05/2016**
ENALAPRIL MALEATE 10 MG TAB	0000	0.52638	08/05/2015
ENALAPRIL MALEATE 2.5 MG TAB	0000	0.31410	08/05/2015
ENALAPRIL MALEATE 20 MG TAB	0000	0.40971	08/05/2015
ENALAPRIL MALEATE 5 MG TAB	0000	0.47625	08/05/2015
ENALAPRIL/HCTZ 10/25 MG TAB	**0000**	**0.25519**	**05/05/2016**
ENALAPRIL/HCTZ 5/12.5 MG TAB	0000	0.18485	09/05/2015
ENALAPRILAT DIHYDRATE 1.25 MG/ML VIAL	0000	3.15000	03/05/2015
ENTACAPONE 200 MG TAB	0000	2.76821	09/05/2015
EPINASTINE HCL 0.05 % DROPS	0000	11.71439	04/05/2016
EPIRUBICIN HCL 200MG/0.1L VIAL	0000	1.96880	06/05/2015
EPLERENONE 25 MG TAB	0000	3.24332	03/05/2016
EPLERENONE 50 MG TAB	0000	2.74624	01/05/2016
ERYTHROMYCIN 2% SOLN	0000	0.72910	03/05/2015
ERYTHROMYCIN EYE OINT	0000	3.31031	09/05/2015
ESCITALOPRAM OXALATE 10 MG TAB	0000	0.14955	08/05/2015
ESCITALOPRAM OXALATE 20 MG TAB	0000	0.18471	08/05/2015
ESCITALOPRAM OXALATE 5 MG TAB	0000	0.13240	08/05/2015
ESCITALOPRAM OXALATE 5 MG/5 ML SOLN	0000	0.59496	12/05/2015
ESTAZOLAM 2 MG TAB	0000	0.86630	12/05/2014
ESTRADIOL 0.025 MG/DAY PATCH	0000	15.07000	02/05/2016
ESTRADIOL 0.0375 MG/DAY PATCH	0000	16.15863	04/05/2016

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ESTRADIOL 0.05 MG/DAY PATCH - AB2	0000	22.05741	03/05/2016
ESTRADIOL 0.06 MG/24 DAY PATCH	**0000**	**14.64917**	**05/05/2016**
ESTRADIOL 0.075 MG/DAY PATCH	0000	17.29625	04/05/2016
ESTRADIOL 0.1 MG/DAY PATCH - AB2	0000	22.26803	03/05/2016
ESTRADIOL 0.5 MG TAB	0000	0.19043	09/05/2015
ESTRADIOL 1 MG TAB	0000	0.16617	09/05/2015
ESTRADIOL 2 MG TAB	0000	0.21658	09/05/2015
ESTRADIOL/NORETH AC 0.5 MG-0.1 MG TAB	0000	5.03677	08/05/2015
ESTRADIOL/NORETH AC 1 MG-0.5 MG TAB	0000	4.74416	08/05/2015
ESTROPIPATE 0.75 MG TAB	0000	0.46135	08/05/2015
ESTROPIPATE 1.5 MG TAB	0000	0.57088	11/05/2015
ESZOPICLONE 1 MG TAB	0000	0.70200	10/05/2015
ESZOPICLONE 2 MG TAB	0000	0.71484	09/05/2015
ESZOPICLONE 3 MG TAB	0000	0.63322	11/05/2015
ETH E/DESOG 25/25/25MCG-0.1/.125/.15MG TAB	0000	0.76065	09/05/2015
ETH E/LEVONOR 30/40/30MCG - 0.05/0.075/0.125MG TAB	0000	0.73634	12/05/2015
ETH E/NOR 25/25/25MCG-0.18/.215/.25MG TAB	**0000**	**1.38610**	**05/05/2016**
ETH E/NOR 30MCG/0.15MG(84)-ETH E 10MCG(7) TAB	0000	2.29894	12/05/2015
ETH E/NOR 35/35/35MCG-0.18/.215/.25MG TAB	0000	0.39127	09/05/2015
ETH E/NOR 35/35/35MCG-0.5/.75/1MG TAB	0000	0.91051	08/05/2015
ETH E/NOR 35/35MCG-0.5/1MG (7-9-5) TAB	0000	0.99893	11/05/2015
ETH E/NORETH 20/30/35MCG-1/1/1MG FE TAB	0000	1.65482	04/05/2016
ETH ESTRADIOL/DESOGEST 20/0.15 TAB	0000	1.09769	08/05/2015
ETH ESTRADIOL/DESOGEST 30 MCG/0.15MG TAB	0000	0.62679	08/05/2015
ETH ESTRADIOL/DROSPIRENONE 0.02/3MG TAB	0000	2.07811	12/05/2015
ETH ESTRADIOL/DROSPIRENONE 0.03-3MG TAB	0000	2.06156	03/05/2016
ETH ESTRADIOL/ETHYN 35MCG/1MG TAB	0000	0.91699	12/05/2015
ETH ESTRADIOL/ETHYN 50MCG/1MG TAB	0000	0.89960	11/05/2015
ETH ESTRADIOL/LEVONOR 20MCG/0.1MG TAB	0000	0.69158	09/05/2015
ETH ESTRADIOL/NORETH 20MCG/1MG TAB	0000	1.21214	08/05/2015
ETH ESTRADIOL/NORETH 30MCG/1.5MG TAB	0000	0.90869	02/05/2016
ETH ESTRADIOL/NORETH 35MCG/0.4MG TAB	0000	1.01621	02/05/2016
ETH ESTRADIOL/NORETH 35MCG/0.5MG TAB	0000	0.90685	02/05/2016
ETH ESTRADIOL/NORETH 35MCG/1MG TAB	0000	0.64286	08/05/2015
ETH ESTRADIOL/NORETH FE 20MCG/1MG TAB	0000	0.82444	08/05/2015
ETH ESTRADIOL/NORETH FE 30MCG/1.5MG TAB	0000	0.74480	09/05/2015
ETH ESTRADIOL/NORGEST 30MCG/0.3MG TAB	0000	0.67777	12/05/2015
ETH ESTRADIOL/NORGEST 35MCG/0.25MG TAB	0000	0.43304	08/05/2015
ETH ESTRADIOL/NORGEST 50MCG/0.5MG TAB	0000	1.41472	08/05/2015
ETHAMBUTOL HCL 400 MG TAB	0000	1.31889	09/05/2015
ETHOSUXIMIDE 250 MG CAP	0000	1.34685	08/05/2015
ETHOSUXIMIDE 250 MG/5 ML SYRP	0000	0.39494	12/05/2015
ETODOLAC 200 MG CAP	0000	1.54170	08/05/2015
ETODOLAC 300 MG CAP	0000	1.87288	08/05/2015
ETODOLAC 400 MG TAB	0000	1.00119	11/05/2015
ETODOLAC 400 MG TAB SA	0000	2.41103	02/05/2016
ETODOLAC 500 MG TAB	0000	0.99435	08/05/2015
ETODOLAC 500 MG TAB SA	0000	2.36436	02/05/2016
ETODOLAC 600 MG TAB	0000	3.92865	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ETOPOSIDE 50 MG CAP	0000	99.17430	06/05/2015
EXEMESTANE 25 MG TAB	0000	10.52408	03/05/2016
FAMCICLOVIR 250 MG TAB	0000	0.65175	09/05/2015
FAMCICLOVIR 500 MG TAB	0000	1.25151	11/05/2015
FAMOTIDINE 20 MG TAB	**0000**	**0.05122**	**05/05/2016**
FAMOTIDINE 40 MG TAB	0000	0.10350	08/05/2015
FAMOTIDINE 40 MG/5 ML SUSP	0000	1.18672	02/05/2016
FAMOTIDINE/CA CARB/MAG HYDROX 10-800-165MG TAB CHEW	0000	0.33600	09/05/2014
FELBAMATE 400 MG TAB	**0000**	**3.71077**	**05/05/2016**
FELBAMATE 600 MG TAB	0000	4.67546	02/05/2016
FELODIPINE ER 10 MG TAB	0000	0.50753	08/05/2015
FELODIPINE ER 2.5 MG TAB	0000	0.68336	02/05/2016
FELODIPINE ER 5 MG TAB	0000	0.67839	11/05/2015
FENOFIBRATE 134 MG CAP	**0000**	**1.81615**	**05/05/2016**
FENOFIBRATE 160 MG TAB	0000	0.91609	11/05/2015
FENOFIBRATE 200 MG CAP	0000	2.88096	09/05/2015
FENOFIBRATE 54 MG TAB	0000	0.67864	11/05/2015
FENOFIBRATE,MICRONIZED 130 MG CAP	0000	4.38731	04/05/2016
FENOFIBRATE,MICRONIZED 43 MG CAPSULE	0000	1.89677	01/05/2016
FENOFIBRATE,MICRONIZED 67 MG CAP	0000	1.08866	08/05/2015
FENOPROFEN 600 MG TAB	0000	3.45792	09/05/2015
FENTANYL 100 MCG/HR PATCH	**0000**	**12.34017**	**05/05/2016**
FENTANYL 12MCG/HR PATCH	0000	15.43846	03/05/2016
FENTANYL 25 MCG/HR PATCH	0000	4.66958	02/05/2016
FENTANYL 50 MCG/HR PATCH	0000	7.06599	04/05/2016
FENTANYL 75 MCG/HR PATCH	**0000**	**11.38930**	**05/05/2016**
FENTANYL CITRATE 1,200 MCG LOZ HD	0000	38.61952	01/05/2016
FENTANYL CITRATE 400 MCG LOZ HD	0000	26.05710	06/05/2015
FENTANYL CITRATE OTFC 600 MCG	0000	31.91570	06/05/2015
FERROUS SULFATE 325 MG (65 MG IRON) TAB	0000	0.00884	11/05/2015
FEXOFENADINE HCL 180 MG TAB	0000	0.45267	08/05/2015
FEXOFENADINE HCL 30 MG/5 ML ORAL SUSP	0000	0.06908	12/05/2015
FEXOFENADINE HCL 60 MG TAB	0000	0.53796	11/05/2015
FINASTERIDE 5 MG TAB	0000	0.16050	08/05/2015
FLAVOXATE HCL 100 MG TAB	**0000**	**0.95565**	**05/05/2016**
FLECAINIDE ACETATE 100 MG TAB	0000	0.63401	09/05/2015
FLECAINIDE ACETATE 150 MG TAB	0000	1.00861	09/05/2015
FLECAINIDE ACETATE 50 MG TAB	0000	0.37012	09/05/2015
FLUCONAZOLE 10 MG/ML SUSP	0000	0.45729	08/05/2015
FLUCONAZOLE 100 MG TAB	0000	1.75136	10/05/2015
FLUCONAZOLE 150 MG TAB	0000	1.86875	08/05/2015
FLUCONAZOLE 200 MG TAB	0000	2.17743	11/05/2015
FLUCONAZOLE 40 MG/ML SUSP	0000	1.04515	08/05/2015
FLUCONAZOLE-NS 400 MG/200 ML PB	0000	0.06040	09/05/2014
FLUDROCORTISONE 0.1 MG TAB	0000	0.57839	08/05/2015
FLUNISOLIDE 0.025% SPRY	0000	3.17666	03/05/2016
FLUOCINOLONE 0.01% SOLN	0000	3.50726	08/05/2015
FLUOCINOLONE 0.025% CRM	0000	1.83687	09/05/2015
FLUOCINOLONE 0.025% OINT	0000	1.93001	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FLUOCINOLONE ACETONIDE 0.01 % CRM	0000	2.38481	01/05/2016
FLUOCINOLONE ACETONIDE OIL 0.01 % DROPS	0000	13.21893	03/05/2016
FLUOCINONIDE 0.05% CRM	0000	1.28400	08/05/2015
FLUOCINONIDE 0.05% GEL	0000	2.88887	03/05/2016
FLUOCINONIDE 0.05% OINT	0000	2.67799	09/05/2015
FLUOCINONIDE 0.05% SOLN	0000	1.99508	08/05/2015
FLUOCINONIDE 0.1 % CREAM (G)	**0000**	**14.22920**	**05/05/2016**
FLUOCINONIDE-E 0.05% CRM	0000	2.43893	12/05/2015
FLUOROMETHOLONE 0.1% DROPS	0000	17.42764	01/05/2016
FLUOROURACIL 2,500 MG/50 ML VL	0000	0.40740	06/05/2015
FLUOROURACIL 5 % SOLN	0000	4.13359	03/05/2016
FLUOROURACIL 5% CRM	0000	5.73623	08/05/2015
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	0.04503	08/05/2015
FLUOXETINE 10 MG TAB	0000	1.13350	11/05/2015
FLUOXETINE 20 MG CAP	0000	0.03797	08/05/2015
FLUOXETINE 20 MG/5 ML SOLN	0000	0.07258	11/05/2015
FLUOXETINE 40 MG CAP	**0000**	**0.22752**	**05/05/2016**
FLUOXETINE HCL 90 MG CAP DR	0000	38.02800	03/05/2016
FLUPHENAZINE 1 MG TAB	0000	0.13488	11/05/2015
FLUPHENAZINE 10 MG TAB	0000	0.29588	09/05/2015
FLUPHENAZINE 2.5 MG TAB	0000	0.20730	08/05/2015
FLUPHENAZINE 5 MG TAB	0000	0.29700	08/05/2015
FLUPHENAZINE DEC 25 MG/ML VIAL	**0000**	**29.49796**	**05/05/2016**
FLURAZEPAM 15 MG CAP	0000	0.76344	09/05/2015
FLURAZEPAM 30 MG CAP	0000	0.54005	09/05/2015
FLURBIPROFEN 0.03% EYE DROPS	0000	2.56100	08/05/2015
FLURBIPROFEN 100 MG TAB	0000	0.49065	08/05/2015
FLURBIPROFEN 50 MG TAB	0000	0.69500	06/05/2015
FLUTICASONE 50 MCG NASAL SPRY	0000	0.31236	03/05/2016
FLUTICASONE PROP 0.005% OINT	0000	0.48547	09/05/2015
FLUTICASONE PROP 0.05% CRM	0000	0.58976	08/05/2015
FLUVASTATIN SODIUM 20 MG CAP	**0000**	**4.26363**	**05/05/2016**
FLUVASTATIN SODIUM 40 MG CAP	**0000**	**4.25562**	**05/05/2016**
FLUVOXAMINE MAL 100 MG TAB	0000	0.27709	08/05/2015
FLUVOXAMINE MAL 25 MG TAB	0000	0.35970	09/05/2015
FLUVOXAMINE MAL 50 MG TAB	0000	0.31678	12/05/2015
FLUVOXAMINE MALEATE 100 MG CAP ER 24H	**0000**	**8.41353**	**05/05/2016**
FLUVOXAMINE MALEATE 150 MG CAP ER 24H	0000	8.40280	04/05/2016
FOLIC ACID 1 MG TAB	0000	0.01976	08/05/2015
FONDAPARINUX 7.5 MG/0.6 ML SYR	0000	171.70289	09/05/2015
FOSINOPRIL SODIUM 10 MG TAB	0000	0.22901	08/05/2015
FOSINOPRIL SODIUM 20 MG TAB	0000	0.22263	09/05/2015
FOSINOPRIL SODIUM 40 MG TAB	0000	0.24334	08/05/2015
FOSINOPRIL/HCTZ 10/12.5 MG TAB	0000	1.23880	11/05/2015
FOSINOPRIL/HCTZ 20/12.5 MG TAB	0000	1.74518	11/05/2015
FUROSEMIDE 10 MG/ML SOLN	0000	0.11786	04/05/2016
FUROSEMIDE 10 MG/ML VIAL	0000	1.23428	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
FUROSEMIDE 20 MG TAB	0000	0.01741	03/05/2016
FUROSEMIDE 40 MG TAB	**0000**	**0.01582**	**05/05/2016**
FUROSEMIDE 80 MG TAB	**0000**	**0.02994**	**05/05/2016**
GABAPENTIN 100 MG CAP	0000	0.03021	08/05/2015
GABAPENTIN 250 MG/5 ML SOLN	0000	0.17070	12/05/2015
GABAPENTIN 300 MG CAP	0000	0.05993	08/05/2015
GABAPENTIN 400 MG CAP	0000	0.07794	08/05/2015
GABAPENTIN 600 MG TAB	**0000**	**0.15402**	**05/05/2016**
GABAPENTIN 800 MG TAB	0000	0.23358	08/05/2015
GALANTAMINE 12MG TAB	**0000**	**1.62062**	**05/05/2016**
GALANTAMINE 4MG TAB	0000	1.66017	04/05/2016
GALANTAMINE 8MG TAB	0000	1.49594	10/05/2015
GALANTAMINE ER 16MG CAP	**0000**	**2.50650**	**05/05/2016**
GALANTAMINE ER 24MG CAP	0000	2.36700	01/05/2016
GALANTAMINE ER 8MG CAP	0000	2.75425	08/05/2015
GATIFLOXACIN 0.5 % DROPS	0000	38.36627	04/05/2016
GEMCITABINE HCL 1 GRAM VIAL	0000	58.58130	06/05/2015
GEMFIBROZIL 600 MG TAB	0000	0.11597	09/05/2015
GENTAMICIN 0.1% CRM	0000	2.51291	04/05/2016
GENTAMICIN 0.1% OINT	0000	2.53617	04/05/2016
GENTAMICIN 3 MG/GM EYE OINT	0000	6.31286	08/05/2015
GENTAMICIN 3 MG/ML EYE DROPS	0000	3.62333	04/05/2016
GENTAMICIN 40 MG/ML VIAL	**0000**	**0.92854**	**05/05/2016**
GLIMEPIRIDE 1 MG TAB	**0000**	**0.11607**	**05/05/2016**
GLIMEPIRIDE 2 MG TAB	0000	0.13181	10/05/2015
GLIMEPIRIDE 4 MG TAB	0000	0.17978	09/05/2015
GLIPIZIDE 10 MG TAB	0000	0.03984	08/05/2015
GLIPIZIDE 5 MG TAB	**0000**	**0.03623**	**05/05/2016**
GLIPIZIDE ER 10 MG TAB	0000	0.40449	08/05/2015
GLIPIZIDE ER 2.5 MG TAB	0000	0.28748	08/05/2015
GLIPIZIDE ER 5 MG TAB	0000	0.20642	08/05/2015
GLIPIZIDE/METFORMIN 2.5/250 MG TAB	0000	0.69150	08/05/2015
GLIPIZIDE/METFORMIN 2.5/500 MG TAB	0000	0.97070	09/06/2015
GLIPIZIDE/METFORMIN 5/500 MG TAB	0000	0.64112	11/05/2015
GLYBURIDE 1.25 MG TAB	0000	0.12375	08/05/2015
GLYBURIDE 2.5 MG TAB	0000	0.17265	08/05/2015
GLYBURIDE 5 MG TAB	0000	0.18815	08/05/2015
GLYBURIDE MICRO 3 MG TAB	**0000**	**0.17954**	**05/05/2016**
GLYBURIDE MICRO 6 MG TAB	0000	0.32046	11/05/2015
GLYBURIDE/METFORMIN 1.25/250 MG TAB	0000	0.11220	08/05/2015
GLYBURIDE/METFORMIN 2.5/500 MG TAB	0000	0.10770	08/05/2015
GLYBURIDE/METFORMIN 5/500 MG TAB	0000	0.08131	08/05/2015
GLYCOPYRROLATE 1 MG TAB	0000	0.42982	12/05/2015
GLYCOPYRROLATE 2 MG TAB	0000	0.96885	04/05/2016
GRANISETRON HCL 1 MG TAB	**0000**	**2.34813**	**05/05/2016**
GRANISETRON HCL 1 MG/ML VIAL	0000	8.20320	06/05/2015
GRISEOFULVIN 125 MG/5 ML SUSP	0000	0.19895	10/19/2015
GRISEOFULVIN 500 MG TAB	0000	7.39862	03/05/2016
GUAIFENESIN 100 MG/5 ML LIQ	0000	0.00900	03/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
GUAIFENESIN/DEXTROMETHORPHAN 100-10MG/5ML LIQ	0000	0.02230	03/05/2015
GUANFACINE 1 MG TAB	0000	0.08895	08/05/2015
GUANFACINE 2 MG TAB	0000	0.12375	08/05/2015
GUANFACINE HCL 1 MG TAB ER 24H	0000	0.97759	09/05/2015
GUANFACINE HCL 2 MG TAB ER 24H	0000	0.90648	09/05/2015
GUANFACINE HCL 3 MG TAB ER 24H	0000	0.94051	09/05/2015
GUANFACINE HCL 4 MG TAB ER 24H	**0000**	**1.00597**	**05/05/2016**
HALOBETASOL PROP 0.05% CRM	**0000**	**3.50261**	**05/05/2016**
HALOBETASOL PROP 0.05% OINT	0000	4.21740	08/05/2015
HALOPERIDOL 0.5 MG TAB	0000	0.31399	11/05/2015
HALOPERIDOL 1 MG TAB	0000	0.40761	08/05/2015
HALOPERIDOL 10 MG TAB	0000	0.97797	11/05/2015
HALOPERIDOL 2 MG TAB	0000	0.69467	11/05/2015
HALOPERIDOL 20 MG TAB	0000	2.21497	11/05/2015
HALOPERIDOL 5 MG TAB	0000	0.83127	11/05/2015
HALOPERIDOL DEC 100 MG/ML AMP	**0000**	**44.13673**	**05/05/2016**
HALOPERIDOL DEC 100 MG/ML VIAL	0000	55.99612	11/05/2015
HALOPERIDOL DECAN 50 MG/ML AMP	0000	32.76892	02/05/2016
HALOPERIDOL LAC 2 MG/ML CONC	**0120**	**0.09063**	**05/05/2016**
HALOPERIDOL LAC 2 MG/ML CONC	0000	0.67483	01/05/2016
HALOPERIDOL LAC 5 MG/ML VIAL	0000	4.39945	11/05/2015
HEPARIN NA 10,000 UNIT/ML VIAL	**0000**	**2.50478**	**05/05/2016**
HEPARIN NA 5,000 UNITS/ML VIAL	**0000**	**1.28247**	**05/05/2016**
HYDRALAZINE 10 MG TAB	**0000**	**0.07503**	**05/05/2016**
HYDRALAZINE 100 MG TAB	0000	0.19850	02/05/2016
HYDRALAZINE 25 MG TAB	**0000**	**0.08618**	**05/05/2016**
HYDRALAZINE 50 MG TAB	**0000**	**0.09431**	**05/05/2016**
HYDROCHLOROTHIAZIDE 12.5 MG CAP	**0000**	**0.05317**	**05/05/2016**
HYDROCHLOROTHIAZIDE 12.5 MG TAB	0000	0.17374	04/05/2016
HYDROCHLOROTHIAZIDE 25 MG TAB	0000	0.01846	08/05/2015
HYDROCHLOROTHIAZIDE 50 MG TAB	0000	0.04182	08/05/2015
HYDROCODON-ACETAMINOPHN 10-300	0000	2.26976	12/05/2015
HYDROCODONE BT/IBU 7.5/200 MG TAB	**0000**	**0.37058**	**05/05/2016**
HYDROCODONE/APAP 10/325 MG TAB	0000	0.22549	08/05/2015
HYDROCODONE/APAP 5/300 MG TAB	0000	1.67001	12/05/2015
HYDROCODONE/APAP 5/325 MG TAB	0000	0.15372	08/05/2015
HYDROCODONE/APAP 7.5-325 MG / 5ML SOLN	0000	0.19112	02/05/2016
HYDROCODONE/APAP 7.5/300 MG TAB	0000	1.83579	12/05/2015
HYDROCODONE/APAP 7.5/325 MG TAB	0000	0.20501	08/05/2015
HYDROCORTISONE 0.2% CRM	0000	4.10513	08/05/2015
HYDROCORTISONE 1% CRM	0000	0.09220	07/30/2015
HYDROCORTISONE 1% LOT	0000	0.07500	07/30/2015
HYDROCORTISONE 1% OINT	0000	0.25979	08/05/2015
HYDROCORTISONE 10 MG TAB	0000	0.53890	11/05/2015
HYDROCORTISONE 100 MG ENEMA	0000	0.10124	09/05/2015
HYDROCORTISONE 2.5 % CREAM/APPL	0000	2.53739	12/05/2015
HYDROCORTISONE 2.5% CRM	0000	0.12170	08/05/2015
HYDROCORTISONE 2.5% LOT	0000	0.22449	08/05/2015
HYDROCORTISONE 2.5% OINT	0000	0.12354	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
HYDROCORTISONE 20 MG TAB	0000	0.93536	11/05/2015
HYDROCORTISONE 5 MG TAB	0000	0.40410	08/05/2015
HYDROCORTISONE BUTYR 0.1% CRM	0000	3.99451	12/05/2015
HYDROCORTISONE BUTYR 0.1% OINT	0000	3.50460	08/05/2015
HYDROCORTISONE VAL 0.2% OINT	0000	4.64560	08/05/2015
HYDROMORPHONE 2 MG TAB	0000	0.13111	08/05/2015
HYDROMORPHONE 4 MG TAB	0000	0.13344	09/05/2015
HYDROMORPHONE HCL 1 MG/ML LIQUID	0000	0.44662	04/05/2016
HYDROMORPHONE HCL 12 MG TAB ER 24H	**0000**	**14.70848**	**05/05/2016**
HYDROMORPHONE HCL 16 MG TAB ER 24H	0000	23.83920	04/05/2016
HYDROMORPHONE HCL 8 MG TAB	0000	0.57230	09/05/2015
HYDROMORPHONE HCL 8 MG TAB ER 24H	**0000**	**12.16281**	**05/05/2016**
HYDROQUINONE 4 % CRM	0000	2.50428	04/05/2016
HYDROXYCHLOROQUINE 200 MG TAB	0000	2.70786	11/05/2015
HYDROXYUREA 500 MG CAP	0000	0.56387	08/05/2015
HYDROXYZINE 10 MG/5 ML SYRP	0000	0.07706	09/05/2015
HYDROXYZINE HCL 10 MG TAB	0000	0.08814	08/05/2015
HYDROXYZINE HCL 25 MG TAB	**0000**	**0.10283**	**05/05/2016**
HYDROXYZINE HCL 50 MG TAB	0000	0.16005	08/05/2015
HYDROXYZINE PAM 25 MG CAP	0000	0.06990	08/05/2015
HYDROXYZINE PAM 50 MG CAP	0000	0.09075	08/05/2015
HYOSCYAMINE 0.125 MG/ML DROP	0000	2.91600	12/05/2014
HYOSCYAMINE SULFATE 0.125MG TAB	0000	0.25595	04/05/2016
IBANDRONATE SODIUM 150 MG TAB	0000	30.03546	03/05/2016
IBUPROFEN 100 MG/5 ML SUSP	0000	0.05913	08/05/2015
IBUPROFEN 200 MG TAB	0000	0.02610	06/19/2015
IBUPROFEN 400 MG TAB	0000	0.06075	08/05/2015
IBUPROFEN 600 MG TAB	0000	0.05370	08/05/2015
IBUPROFEN 800 MG TAB	0000	0.07401	08/05/2015
IMATINIB MESYLATE 400 MG TAB	**0000**	**381.18500**	**05/05/2016**
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	0.18420	08/05/2015
IMIPRAMINE HCL 25 MG TAB	0000	0.15480	08/05/2015
IMIPRAMINE HCL 50 MG TAB	0000	0.30754	08/05/2015
IMIPRAMINE PAMOATE 100 MG CAP	0000	11.48600	08/05/2015
IMIPRAMINE PAMOATE 75 MG CAP	0000	7.01977	09/05/2015
INDAPAMIDE 1.25 MG TAB	0000	0.29925	08/05/2015
INDAPAMIDE 2.5 MG TAB	0000	0.34412	08/05/2015
INDOMETHACIN 25 MG CAP	0000	0.07091	08/05/2015
INDOMETHACIN 50 MG CAP	0000	0.14235	08/05/2015
INDOMETHACIN 75 MG CAP SA	0000	1.38584	09/05/2015
INSULIN NPH HUM/REG INSULIN HM 70-30/ML INSULN PEN	0000	26.97833	08/05/2015
INSULIN NPH HUMAN ISOPHANE 100/ML (3) INSULN PEN	0000	28.24400	08/05/2015
IPRATR-ALBUTEROL 0.5-3 MG/3 ML SOLN	0000	0.08403	09/05/2015
IPRATROPIUM 0.03% SPRAY	0000	1.01430	08/05/2015
IPRATROPIUM 0.06% SPRAY	0000	2.15227	08/05/2015
IPRATROPIUM BR 0.02% SOLN	0000	0.07170	08/05/2015
IRBESARTAN 150 MG TAB	0000	0.21467	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
IRBESARTAN 300 MG TAB	0000	0.34621	08/05/2015
IRBESARTAN 75 MG TAB	0000	0.25606	09/05/2015
IRBESARTAN/HCTZ 150 MG-12.5 MG TAB	0000	0.38417	08/05/2015
IRBESARTAN/HCTZ 300 MG-12.5 MG TAB	0000	0.44920	08/05/2015
IRON,CARBONYL/FOLIC ACID/MVI W-MINERALS 50-1.25MG TAB	0000	0.14000	05/04/2012
ISONIAZID 300 MG TAB	0000	0.27166	09/05/2015
ISOSORBIDE DN 10 MG TAB	0000	0.83355	08/05/2015
ISOSORBIDE DN 20 MG TAB	0000	1.02663	09/05/2015
ISOSORBIDE DN 30 MG TAB	0000	1.05214	08/05/2015
ISOSORBIDE DN 40 MG TAB SA	0000	2.02434	09/05/2015
ISOSORBIDE DN 5 MG TAB	0000	0.87665	09/05/2015
ISOSORBIDE MN 10 MG TAB	0000	0.24915	03/05/2016
ISOSORBIDE MN 120 MG TAB SA	0000	0.84630	08/05/2015
ISOSORBIDE MN 20 MG TAB	0000	0.14255	04/05/2016
ISOSORBIDE MN 30 MG TAB SA	0000	0.19745	08/05/2015
ISOSORBIDE MN 60 MG TAB SA	**0000**	**0.29583**	**05/05/2016**
ISOTRETINOIN 20 MG CAP	0000	7.59068	04/05/2016
ISOTRETINOIN 30 MG CAP	**0000**	**12.69198**	**05/05/2016**
ISOTRETINOIN 40 MG CAP	0000	9.64145	03/05/2016
ISRADIPINE 5 MG CAP	0000	2.13375	08/05/2015
ITRACONAZOLE 100 MG CAP	0000	8.30324	02/05/2016
IVERMECTIN 3 MG TAB	0000	6.36075	08/05/2015
KETOCONAZOLE 2 % FOAM	0000	5.39100	06/05/2015
KETOCONAZOLE 2% CRM	0000	2.84687	02/05/2016
KETOCONAZOLE 2% SHAMPOO	0000	0.08613	08/05/2015
KETOCONAZOLE 200 MG TAB	0000	1.69646	09/05/2015
KETOPROFEN 200 MG CAP SA	0000	10.16844	02/05/2016
KETOPROFEN 50 MG CAP	0000	0.30525	08/05/2015
KETOPROFEN 75 MG CAP	0000	0.66393	12/05/2015
KETOROLAC 0.4% OPHTH SOLN	0000	9.78756	02/05/2016
KETOROLAC 0.5% OPHTH SOLN	0000	2.30626	09/05/2015
KETOROLAC 10 MG TAB	0000	1.06870	09/05/2015
KETOROLAC 30 MG/ML VIAL	**0000**	**2.44292**	**05/05/2016**
KETOROLAC 60 MG/2ML VIAL	0000	1.45296	08/05/2015
L-NORG-E EST 0.15 MG-30 MCG 3 MONTH DOSE PK	0000	1.01762	12/05/2015
L-NORG-E EST/E EST 0.10 MG-20 MCG (84)/10 MCG 3 MONTH	0000	2.15038	12/05/2015
LABETALOL HCL 100 MG TAB	0000	0.28485	08/05/2015
LABETALOL HCL 200 MG TAB	0000	0.40791	08/05/2015
LABETALOL HCL 300 MG TAB	0000	0.61667	09/05/2015
LACTULOSE 10 GM/15 ML SOLN-CON	0000	0.01758	08/05/2015
LACTULOSE 10 GM/15 ML SOLN-ENU	0000	0.01812	08/05/2015
LAMIVUDINE 150 MG TAB	**0000**	**2.84824**	**05/05/2016**
LAMIVUDINE/ZIDOVUDINE 150 MG-300 MG TAB	**0000**	**3.30421**	**05/05/2016**
LAMOTRIGINE 100 MG TAB	**0000**	**0.07152**	**05/05/2016**
LAMOTRIGINE 100 MG TAB RAPDIS	**0000**	**7.87340**	**05/05/2016**
LAMOTRIGINE 150 MG TAB	**0000**	**0.09195**	**05/05/2016**
LAMOTRIGINE 200 MG TAB	0000	0.09986	08/05/2015
LAMOTRIGINE 200 MG TAB ER 24	0000	9.24492	03/05/2016
LAMOTRIGINE 25 MG DISPER TAB	0000	0.40275	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LAMOTRIGINE 25 MG TAB	0000	0.06885	08/05/2015
LAMOTRIGINE 25 MG TAB RAPDIS	**0000**	**6.28480**	**05/05/2016**
LAMOTRIGINE 250 MG TAB ER 24	**0000**	**15.37800**	**05/05/2016**
LAMOTRIGINE 300 MG TAB ER 24	**0000**	**14.26500**	**05/05/2016**
LAMOTRIGINE 5 MG DISPER TAB	0000	0.38895	11/05/2015
LAMOTRIGINE 50 MG TAB RAPDIS	**0000**	**7.90800**	**05/05/2016**
LAMOTRIGINE ER 100 MG TABLET	0000	10.63401	11/05/2015
LAMOTRIGINE ER 25 MG TAB	**0000**	**3.99775**	**05/05/2016**
LAMOTRIGINE ER 50 MG TABLET	**0000**	**7.16586**	**05/05/2016**
LANSOPRAZOLE 15 MG CAP DR	0000	0.91044	08/05/2015
LANSOPRAZOLE 30 MG CAP DR	0000	0.61597	11/05/2015
LANSOPRAZOLE/AMOXICILN/CLARITH 30-500-500 COMBO. PKG	**0000**	**5.50762**	**05/05/2016**
LATANOPROST 0.005 % DROPS	0000	3.22623	10/05/2015
LEFLUNOMIDE 10 MG TAB	**0000**	**5.31338**	**05/05/2016**
LEFLUNOMIDE 20 MG TAB	0000	5.14993	04/05/2016
LETROZOLE 2.5 MG TAB	0000	0.20250	08/05/2015
LEUCOVORIN CALCIUM 25 MG TAB	**0000**	**7.33025**	**05/05/2016**
LEUCOVORIN CALCIUM 5 MG TAB	0000	1.18947	11/05/2015
LEV/NORGES/ETH/ESTR 90/20 MCG TAB	0000	2.33405	11/05/2015
LEVALBUTEROL HCL 0.31 MG/3 ML VIAL-NEB	**0000**	**0.87184**	**05/05/2016**
LEVALBUTEROL HCL 0.63 MG/3 ML VIAL-NEB	0000	0.57579	04/05/2016
LEVALBUTEROL HCL 1.25MG/3ML VIAL-NEB	0000	0.74880	08/05/2015
LEVETIRACETAM 100 MG/ML SOLN	0000	0.05522	08/05/2015
LEVETIRACETAM 1000 MG TAB	0000	0.39375	08/05/2015
LEVETIRACETAM 250 MG TAB	0000	0.12726	09/05/2015
LEVETIRACETAM 500 MG TAB	0000	0.14456	08/05/2015
LEVETIRACETAM 500 MG TAB.SR 24H	0000	0.45935	09/05/2015
LEVETIRACETAM 500 MG/5 ML VIAL	0000	1.31260	03/05/2015
LEVETIRACETAM 750 MG TAB	0000	0.26840	07/30/2015
LEVETIRACETAM ER 750 MG TAB	0000	0.68750	08/05/2015
LEVOBUNOLOL 0.5% EYE DROPS	0000	2.91520	03/05/2016
LEVOCARNITINE 100 MG/ML SOLN	0000	0.24344	08/05/2015
LEVOCARNITINE 200 MG/ML VIAL	0000	2.78000	04/15/2016
LEVOCARNITINE 330 MG TAB	0000	0.62308	12/05/2015
LEVOCETIRIZINE 2.5 MG/5 ML SOLN	0000	0.52063	04/05/2016
LEVOCETIRIZINE DIHYDROCHLORIDE 5 MG TAB	**0000**	**0.30845**	**05/05/2016**
LEVOFLOXACIN 250 MG TAB	0000	0.22856	08/05/2015
LEVOFLOXACIN 250MG/10ML SOLUTION	0000	1.15683	04/05/2016
LEVOFLOXACIN 500 MG TAB	0000	0.22896	08/05/2015
LEVOFLOXACIN 750 MG TAB	0000	0.46750	08/05/2015
LEVONOR/ETH E 0.15 MG/30 MCG TAB	0000	0.58903	08/05/2015
LEVOTHYROXINE 100 MCG TAB	**0000**	**0.49196**	**05/05/2016**
LEVOTHYROXINE 112 MCG TAB	0000	0.52977	12/05/2015
LEVOTHYROXINE 125 MCG TAB	0000	0.60504	12/05/2015
LEVOTHYROXINE 137 MCG TAB	0000	0.61569	12/05/2015
LEVOTHYROXINE 150 MCG TAB	0000	0.56747	12/05/2015
LEVOTHYROXINE 175 MCG TAB	0000	0.67356	12/05/2015
LEVOTHYROXINE 200 MCG TAB	0000	0.68247	12/05/2015
LEVOTHYROXINE 25 MCG TAB	0000	0.49573	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LEVOTHYROXINE 300 MCG TAB	0000	1.19685	08/05/2015
LEVOTHYROXINE 50 MCG TAB	0000	0.49649	12/05/2015
LEVOTHYROXINE 75 MCG TAB	0000	0.49856	08/05/2015
LEVOTHYROXINE 88 MCG TAB	0000	0.46101	12/05/2015
LIDOCAINE 2% VISCOUS SOLN	0000	0.02704	08/05/2015
LIDOCAINE 5 % OINT. (G)	0000	5.61320	03/05/2016
LIDOCAINE 5%(700MG) ADH. PATCH	0000	7.06294	02/05/2016
LIDOCAINE HCL 1% VIAL	0000	0.08423	08/05/2015
LIDOCAINE HCL 2% JELLY	0000	0.41062	08/05/2015
LIDOCAINE HCL 40 MG/ML SOLN	0000	0.20542	04/05/2016
LIDOCAINE-HC 3-0.5% CRM/APPL	0000	1.52490	06/05/2015
LIDOCAINE-PRILOCAINE CRM	0000	1.08766	09/05/2015
LINDANE 1% LOT	0000	2.65125	08/05/2015
LIOTHYRONINE SOD 50 MCG TAB	0000	1.60875	08/05/2015
LIOTHYRONINE SODIUM 25 MCG TAB	0000	0.76049	11/05/2015
LIOTHYRONINE SODIUM 5 MCG TAB	0000	0.62638	11/05/2015
LISINOPRIL 10 MG TAB	0000	0.02280	08/05/2015
LISINOPRIL 2.5 MG TAB	0000	0.01710	08/05/2015
LISINOPRIL 20 MG TAB	0000	0.03261	08/05/2015
LISINOPRIL 30 MG TAB	0000	0.07395	01/05/2016
LISINOPRIL 40 MG TAB	0000	0.06573	08/05/2015
LISINOPRIL 5 MG TAB	0000	0.02155	01/05/2016
LISINOPRIL/HCTZ 10/12.5 MG TAB	**0000**	**0.05022**	**05/05/2016**
LISINOPRIL/HCTZ 20/12.5 MG TAB	0000	0.05447	08/05/2015
LISINOPRIL/HCTZ 20/25 MG TAB	0000	0.06848	08/05/2015
LITHIUM CARBONATE 150 MG CAP	0000	0.07370	01/05/2016
LITHIUM CARBONATE 300 MG CAP	**0000**	**0.03300**	**05/05/2016**
LITHIUM CARBONATE 300 MG TAB	**0000**	**0.19976**	**05/05/2016**
LITHIUM CARBONATE 600 MG CAP	0000	0.13785	11/05/2015
LITHIUM CARBONATE ER 300 MG TAB	0000	0.27225	08/05/2015
LITHIUM ER 450 MG TAB	0000	0.39486	08/05/2015
LOPERAMIDE HCL 1 MG/5 ML LIQ	0000	0.04530	12/05/2014
LOPERAMIDE HCL 2 MG CAP	0000	0.41605	02/05/2016
LORATADINE 10MG REDI-TAB	0000	0.43022	08/05/2015
LORATADINE 10MG TAB	0000	0.06172	08/05/2015
LORATADINE 5MG/5ML SYRP	0000	0.05628	08/05/2015
LORATADINE/PSE 10/240MG TAB SA	0000	0.52210	06/05/2015
LORAZEPAM 0.5 MG TAB	0000	0.02816	08/05/2015
LORAZEPAM 1 MG TAB	0000	0.03177	08/05/2015
LORAZEPAM 2 MG TAB	0000	0.04911	08/05/2015
LORAZEPAM 2 MG/ML ORAL CONC	0000	0.78150	08/05/2015
LORAZEPAM 2 MG/ML VIAL	**0000**	**1.89450**	**05/05/2016**
LOSARTAN POTASSIUM 100 MG TAB	0000	0.07350	08/05/2015
LOSARTAN POTASSIUM 25 MG TAB	0000	0.05417	08/05/2015
LOSARTAN POTASSIUM 50 MG TAB	**0000**	**0.06028**	**05/05/2016**
LOSARTAN-HCTZ 100-12.5 MG TAB	0000	0.12317	08/05/2015
LOSARTAN-HCTZ 100-25 MG TAB	0000	0.13250	08/05/2015
LOSARTAN-HCTZ 50-12.5 MG TAB	0000	0.08534	08/05/2015
LOVASTATIN 10 MG TAB	0000	0.08181	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
LOVASTATIN 20 MG TAB	0000	0.07300	08/05/2015
LOVASTATIN 40 MG TAB	0000	0.09061	08/05/2015
LOXAPINE SUCCINATE 10 MG CAP	0000	0.47168	09/05/2015
LOXAPINE SUCCINATE 25 MG CAP	0000	0.84495	08/05/2015
LOXAPINE SUCCINATE 50 MG CAP	0000	1.10370	08/05/2015
MALATHION 0.5 % LOT	0000	4.33043	08/05/2015
MECLIZINE 12.5 MG TAB	0000	0.24850	09/05/2015
MECLIZINE HCL 25 MG TAB	0000	0.28440	08/05/2015
MEDROXYPROGEST 150 MG/ML SYR	0000	88.63087	11/05/2015
MEDROXYPROGEST 150 MG/ML VIAL	**0000**	**71.24345**	**05/05/2016**
MEDROXYPROGESTERONE 10 MG TAB	0000	0.24776	08/05/2015
MEDROXYPROGESTERONE 2.5 MG TAB	0000	0.19172	08/05/2015
MEDROXYPROGESTERONE 5 MG TAB	0000	0.21160	08/05/2015
MEFENAMIC ACID 250 MG CAP	0000	9.00719	03/05/2016
MEGESTROL 20 MG TAB	0000	0.19083	09/05/2015
MEGESTROL 40 MG TAB	**0000**	**0.31078**	**05/05/2016**
MEGESTROL ACET 40 MG/ML SUSP	0000	0.09626	08/05/2015
MEGESTROL ACETATE 625MG/5ML ORAL SUSP	**0000**	**4.59971**	**05/05/2016**
MELOXICAM 15 MG TAB	0000	0.03270	08/05/2015
MELOXICAM 7.5 MG TAB	**0000**	**0.02081**	**05/05/2016**
MEMANTINE HCL 10 MG TAB	**0000**	**0.41975**	**05/05/2016**
MEMANTINE HCL 5 MG TABLET	0000	0.45484	11/05/2015
MEPERIDINE 100 MG TAB	**0000**	**1.27269**	**05/05/2016**
MEPERIDINE 50 MG TAB	0000	0.99326	08/05/2015
MERCAPTOPURINE 50 MG TAB	0000	2.72735	11/05/2015
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	0.25577	12/05/2015
METAXALONE 800 MG TAB	0000	4.70530	11/05/2015
METFORMIN HCL 1000 MG TAB	0000	0.03863	08/05/2015
METFORMIN HCL 500 MG TAB	0000	0.02033	08/05/2015
METFORMIN HCL 850 MG TAB	0000	0.04140	08/05/2015
METFORMIN HCL ER 1,000 MG TAB	0000	14.44521	02/05/2016
METFORMIN HCL ER 500 MG FILM TAB	0000	8.57068	04/05/2016
METFORMIN HCL ER 500 MG TAB	0000	0.04019	08/05/2015
METFORMIN HCL ER 750 MG TAB	**0000**	**0.13556**	**05/05/2016**
METHADONE HCL 10 MG TAB	0000	0.21057	09/05/2015
METHADONE HCL 5 MG TAB	0000	0.28425	08/05/2015
METHADONE INTENSOL 10 MG/ML CONC	**0000**	**0.83580**	**05/05/2016**
METHAZOLAMIDE 25 MG TAB	**0000**	**3.21330**	**05/05/2016**
METHAZOLAMIDE 50 MG TAB	0000	5.84742	01/05/2016
METHENAMINE HIPP 1 GM TAB	0000	2.18441	11/05/2015
METHIMAZOLE 10 MG TAB	0000	0.22980	08/05/2015
METHIMAZOLE 5 MG TAB	0000	0.17340	08/05/2015
METHOCARBAMOL 500 MG TAB	**0000**	**0.10098**	**05/05/2016**
METHOCARBAMOL 750 MG TAB	0000	0.07973	08/05/2015
METHOTREXATE 2.5 MG TAB	0000	2.15057	09/05/2015
METHOTREXATE 25 MG/ML VIAL	0000	3.63375	08/05/2015
METHOTREXATE 25 MG/ML VIAL-PF	0000	1.64450	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
METHSCOPOLAMINE BROM 2.5 MG TAB	0000	2.17095	08/05/2015
METHSCOPOLAMINE BROM 5 MG TAB	**0000**	**1.86475**	**05/05/2016**
METHYLDOPA 250 MG TAB	0000	0.15550	09/05/2015
METHYLDOPA 500 MG TAB	0000	0.30048	11/05/2015
METHYLERGONOVINE MALEATE 0.2 MG TAB	**0000**	**23.42854**	**05/05/2016**
METHYLPHENIDATE 10 MG TAB	0000	0.83970	08/05/2015
METHYLPHENIDATE 10 MG TAB SA	0000	5.46888	03/05/2016
METHYLPHENIDATE 20 MG TAB	0000	1.14255	11/05/2015
METHYLPHENIDATE 5 MG TAB	0000	0.49028	08/05/2015
METHYLPHENIDATE HCL 20 MG TAB ER	0000	4.69382	02/05/2016
METHYLPRED 4 MG TAB DOSEPAK	0000	0.82575	11/05/2015
METHYLPREDNISOLONE 4 MG TAB	0000	1.39648	09/05/2015
METHYLPREDNISOLONE ACETATE 80 MG/ML VIAL	0000	10.90125	08/05/2015
METOCLOPRAMIDE 10 MG TAB	0000	0.05664	08/05/2015
METOCLOPRAMIDE 5 MG TAB	0000	0.06970	09/05/2015
METOCLOPRAMIDE 5 MG/5 ML SYRP	0000	0.01685	08/05/2015
METOLAZONE 10 MG TAB	0000	1.95120	11/05/2015
METOLAZONE 2.5 MG TAB	0000	1.78508	08/05/2015
METOLAZONE 5 MG TAB	0000	2.15131	09/05/2015
METOPROLOL 100 MG TAB	0000	0.03155	08/05/2015
METOPROLOL 25 MG TAB	0000	0.02850	08/05/2015
METOPROLOL 50 MG TAB	0000	0.02145	08/05/2015
METOPROLOL SUCC ER 100 MG TAB	0000	0.71008	11/05/2015
METOPROLOL SUCC ER 200 MG TAB	0000	1.32749	11/05/2015
METOPROLOL SUCC ER 25 MG TAB	0000	0.39480	11/05/2015
METOPROLOL SUCC ER 50 MG TAB	0000	0.32462	11/05/2015
METOPROLOL-HCTZ 100/25MG TAB	0000	1.51875	08/05/2015
METOPROLOL-HCTZ 50/25MG TAB	0000	1.03900	11/05/2015
METRONIDAZOLE 0.75% CRM	0000	2.93766	11/05/2015
METRONIDAZOLE 250 MG TAB	0000	0.40348	08/05/2015
METRONIDAZOLE 375 MG CAP	0000	5.86590	08/05/2015
METRONIDAZOLE 500 MG TAB	0000	0.55200	08/05/2015
METRONIDAZOLE 500 MG/100 ML	**0000**	**0.02085**	**05/05/2016**
METRONIDAZOLE TOP 0.75% GEL	0000	2.69867	11/05/2015
METRONIDAZOLE VAG 0.75% GEL	**0000**	**1.58384**	**05/05/2016**
MEXILETINE 150 MG CAP	0000	1.03647	08/05/2015
MEXILETINE 200 MG CAP	0000	1.07140	11/05/2015
MICONAZOLE NITRATE 2 % CRM/APPL	0000	0.01670	06/05/2015
MIDODRINE HCL 10 MG TAB	0000	1.27427	09/05/2015
MIDODRINE HCL 2.5 MG TAB	0000	0.53363	08/05/2015
MIDODRINE HCL 5 MG TAB	0000	0.69826	09/05/2015
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	0.40629	10/05/2015
MINOCYCLINE 50 MG CAP	**0000**	**0.22605**	**05/05/2016**
MINOCYCLINE 75 MG CAP	0000	0.67595	08/05/2015
MINOCYCLINE HCL 100 MG TAB	**0000**	**4.48196**	**05/05/2016**
MINOCYCLINE HCL 50 MG TABLET	0000	2.39550	11/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
MINOCYCLINE HCL 75MG TAB	**0000**	**2.98650**	**05/05/2016**
MINOXIDIL 10 MG TAB	0000	0.30510	08/05/2015
MINOXIDIL 2.5 MG TAB	0000	0.18788	08/05/2015
MIRTAZAPINE 15 MG RPD DISLV TAB	0000	1.33808	09/05/2015
MIRTAZAPINE 15 MG TAB	0000	0.16680	01/05/2016
MIRTAZAPINE 30 MG RPD DISLV TAB	0000	1.14910	09/05/2015
MIRTAZAPINE 30 MG TAB	0000	0.17088	08/05/2015
MIRTAZAPINE 45 MG RPD DISLV TAB	0000	1.55300	08/05/2015
MIRTAZAPINE 45 MG TAB	0000	0.31166	08/05/2015
MIRTAZAPINE 7.5 MG TAB	0000	2.17370	01/01/2016
MISOPROSTOL 100 MCG TAB	0000	0.64720	08/05/2015
MISOPROSTOL 200 MCG TAB	0000	1.17803	08/05/2015
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	1.34626	08/05/2015
MOEXIPRIL-HCTZ 15-12.5 MG TAB	**0000**	**1.06264**	**05/05/2016**
MOEXIPRIL-HCTZ 15/25 MG TAB	**0000**	**0.84570**	**05/05/2016**
MOMETASONE FUROATE 0.1% CRM	**0000**	**0.36231**	**05/05/2016**
MOMETASONE FUROATE 0.1% OINT	**0000**	**0.37273**	**05/05/2016**
MOMETASONE FUROATE 0.1% SOLN	**0000**	**0.33476**	**05/05/2016**
MONTELUKAST SODIUM 10 MG TAB	**0000**	**0.17150**	**05/05/2016**
MONTELUKAST SODIUM 4 MG GRAN PK	0000	5.02812	12/05/2015
MONTELUKAST SODIUM 4 MG TAB CHEW	0000	0.26642	08/05/2015
MONTELUKAST SODIUM 5 MG TAB CHEW	0000	0.28047	08/05/2015
MORPHINE SULF 100 MG TAB SA	0000	3.27050	09/05/2015
MORPHINE SULF 15 MG TAB SA	0000	0.55393	09/05/2015
MORPHINE SULF 200 MG TAB SA	0000	4.88751	02/05/2016
MORPHINE SULF 30 MG TAB SA	0000	0.85518	11/05/2015
MORPHINE SULF 60 MG TAB SA	0000	1.64296	11/05/2015
MORPHINE SULFATE 10 MG/5 ML SOLUTION	0000	0.06140	11/05/2015
MORPHINE SULFATE 100 MG/5 ML (20 MG/ML) SOLN	0000	0.53525	08/05/2015
MORPHINE SULFATE 30 MG TABLET	0000	0.22500	06/05/2015
MORPHINE SULFATE IR 15 MG TAB	0000	0.15952	09/05/2015
MUPIROCIN 2% OINT	0000	0.34159	08/05/2015
MYCOPHENOLATE 250 MG CAP	0000	0.26925	08/05/2015
MYCOPHENOLATE 500 MG TAB	0000	0.48999	09/05/2015
MYCOPHENOLATE SODIUM 180 MG TABLET DR	**0000**	**3.55944**	**05/05/2016**
MYCOPHENOLATE SODIUM 360 MG TAB DR	0000	6.54247	04/05/2016
NABUMETONE 500 MG TAB	0000	0.19911	08/05/2015
NABUMETONE 750 MG TAB	0000	0.32794	08/05/2015
NADOLOL 20 MG TAB	0000	2.45718	08/05/2015
NADOLOL 40 MG TAB	0000	2.81281	08/05/2015
NADOLOL 80 MG TAB	0000	3.76617	03/05/2016
NADOLOL/BENDROFLUMETHIAZIDE 40 MG-5 MG TABLET	0000	2.79940	11/05/2015
NALTREXONE 50 MG TAB	**0000**	**1.05270**	**05/05/2016**
NAPHAZOLINE HCL 0.1 % DROPS	0000	0.24980	08/05/2015
NAPROXEN 125 MG/5 ML SUSP	0000	0.19306	08/05/2015
NAPROXEN 250 MG TAB	0000	0.06585	12/05/2015
NAPROXEN 375 MG TAB	0000	0.06325	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NAPROXEN 375 MG TAB EC	0000	0.24795	08/05/2015
NAPROXEN 500 MG TAB	**0000**	**0.07275**	**05/05/2016**
NAPROXEN 500 MG TAB EC	0000	0.28908	08/05/2015
NAPROXEN SODIUM 275 MG TAB	**0000**	**1.04941**	**05/05/2016**
NAPROXEN SODIUM 550 MG TAB	0000	2.69938	11/05/2015
NARATRIPTAN HCL 1 MG TAB	0000	6.12779	04/05/2016
NARATRIPTAN HCL 2.5 MG TAB	0000	4.94094	04/05/2016
NATEGLINIDE 120 MG TAB	0000	1.04052	09/05/2015
NATEGLINIDE 60 MG TAB	0000	1.09718	08/05/2015
NEFAZODONE HCL 100 MG TAB	0000	1.10542	11/05/2015
NEFAZODONE HCL 250 MG TAB	0000	1.29960	11/05/2015
NEO/BAC/POLY 3.5MG-400U-100,00U/GM EYE OINT	**0000**	**13.93918**	**05/05/2016**
NEO/POLY/DEXAMET EYE OINT	0000	5.41654	03/05/2016
NEO/POLYMYXIN/DEXAMETH DROPS	0000	4.88427	08/05/2015
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SOLN	0000	6.49832	03/05/2016
NEO/POLYMYXIN/HC 3.5MG-10K-1%/ML EAR SUSP	**0000**	**8.11297**	**05/05/2016**
NEOMY-BAC-POLY 3.5-400U-5,000U/GM OINT	0000	0.10500	12/05/2014
NEOMYCI/POLY/GRAM OPHTH SOL	0000	5.81807	04/05/2016
NEOMYCIN 500 MG TAB	0000	0.97080	08/05/2015
NEOMYCIN/POLY/HC EYE DROPS	0000	17.21280	08/05/2015
NEVIRAPINE 200 MG TAB	**0000**	**0.14079**	**05/05/2016**
NIACIN 1,000 MG TAB ER 24H	0000	3.99092	11/05/2015
NIACIN 500 MG TAB ER 24H	**0000**	**1.99347**	**05/05/2016**
NIACIN 750 MG TAB ER 24H	**0000**	**2.99936**	**05/05/2016**
NICARDIPINE HCL 20 MG CAP	0000	1.70000	11/05/2015
NICOTINE 14 MG/24HR PATCH	0000	2.32607	08/05/2015
NICOTINE 21 MG/24HR PATCH	0000	2.42894	08/05/2015
NICOTINE 7 MG/24 HOUR PATCH TD24	0000	2.35500	08/05/2015
NICOTINE POLACRILEX 2 MG GUM	0000	0.26973	08/05/2015
NICOTINE POLACRILEX 4 MG GUM	0000	0.32810	08/05/2015
NIFEDIPINE 10 MG CAP	0000	0.87786	08/05/2015
NIFEDIPINE 20 MG CAP	0000	2.47395	08/05/2015
NIFEDIPINE ER 30 MG TAB - AB1	0000	0.50037	11/05/2015
NIFEDIPINE ER 30 MG TAB - AB2	0000	0.46415	08/05/2015
NIFEDIPINE ER 60 MG TAB - AB1	0000	0.91972	09/05/2015
NIFEDIPINE ER 60 MG TAB - AB2	0000	0.61676	08/05/2015
NIFEDIPINE ER 90 MG TAB - AB1	0000	1.34007	11/05/2015
NIFEDIPINE ER 90 MG TAB - AB2	0000	0.78645	08/05/2015
NISOLDIPINE 17 MG TAB ER 24H	0000	5.53302	04/05/2016
NISOLDIPINE ER 34 MG TAB	0000	8.49270	08/05/2015
NISOLDIPINE ER 8.5 MG TAB	0000	3.97887	03/05/2016
NITROFURANTOIN 25 MG/5 ML SUSP	**0000**	**2.22228**	**05/05/2016**
NITROFURANTOIN MCR 100 MG CAP	0000	1.78481	08/05/2015
NITROFURANTOIN MCR 50 MG CAP	0000	1.06321	08/05/2015
NITROFURANTOIN MONOHYD 100 MG CAP	0000	2.19120	08/05/2015
NITROGLYCERIN 0.1 MG/HR PATCH	0000	1.00629	11/05/2015
NITROGLYCERIN 0.2 MG/HR PATCH	0000	0.69212	08/05/2015
NITROGLYCERIN 0.4 MG/HR PATCH	0000	0.63251	08/05/2015
NITROGLYCERIN 0.6 MG/HR PATCH	0000	1.13240	09/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
NITROGLYCERIN 2.5 MG CAP ER	0000	0.42000	09/05/2014
NITROGLYCERIN 6.5 MG CAP ER	0000	0.49500	09/05/2014
NITROGLYCERIN LINGUAL 0.4 MG	**0000**	**31.36860**	**05/05/2016**
NIZATIDINE 150 MG CAP	0000	0.31976	08/05/2015
NIZATIDINE 150 MG/10 ML SOLN	0000	0.55088	04/05/2016
NIZATIDINE 300 MG CAP	**0000**	**0.85100**	**05/05/2016**
NOR/ETH/ESTR/ FE 0.4MG-35MCG (21)/75MG (7) CHEW	0000	2.58728	01/05/2016
NORELGESTROMIN/ETHIN.ESTRADIOL 150-35/24H PATCH TDWK	0000	38.61510	04/05/2016
NORETH-ETHINYL ESTRADIOL/IRON 0.8-25(24) TAB CHEW	**0000**	**3.59605**	**05/05/2016**
NORETHIND AC/ETH ESTRADIOL 1 MG-5 MCG TAB	0000	3.12224	03/05/2016
NORETHINDRONE 0.35 MG TAB	0000	0.48322	08/05/2015
NORETHINDRONE 5 MG TAB	0000	2.18192	12/05/2015
NORETHINDRONE-E.ESTRADIOL-IRON 1MG-20(24) TABLET	0000	2.71893	03/05/2016
NORETHINDRONE-ETHINYL ESTRAD 10-11 TABLET	0000	1.06670	06/05/2015
NORTRIPTYLINE HCL 10 MG CAP	0000	0.13611	08/05/2015
NORTRIPTYLINE HCL 25 MG CAP	0000	0.20383	08/05/2015
NORTRIPTYLINE HCL 50 MG CAP	0000	0.19254	08/05/2015
NORTRIPTYLINE HCL 75 MG CAP	0000	0.33355	09/05/2015
NPH, HUMAN INSULIN ISOPHANE 100 UNIT/ML VIAL	0000	14.04240	04/05/2016
NYSTATIN 100,000 UNIT/GM CRM	0000	0.54762	09/05/2015
NYSTATIN 100,000 UNIT/GM OINT	0000	0.76133	08/05/2015
NYSTATIN 100,000 UNIT/GM PWDR	0000	0.87350	08/05/2015
NYSTATIN 100,000 UNIT/ML SUSP	**0000**	**0.10739**	**05/05/2016**
NYSTATIN 500,000 UNIT ORAL TAB	0000	0.76758	11/05/2015
NYSTATIN/TRIAMCINOLONE CRM	0000	3.82748	08/05/2015
NYSTATIN/TRIAMCINOLONE OINT	0000	4.07349	03/05/2016
OB COMPLETE GOLD SOFTGEL	0000	0.14000	04/05/2016
OFLOXACIN 0.3% EAR DROPS	0000	19.61164	03/05/2016
OFLOXACIN 0.3% EYE DROPS	0000	2.84850	08/05/2015
OLANZAPINE 10 MG TAB	**0000**	**0.22958**	**05/05/2016**
OLANZAPINE 10 MG TAB RAPDIS	**0000**	**2.35478**	**05/05/2016**
OLANZAPINE 10 MG VIAL	0000	45.11730	03/05/2015
OLANZAPINE 15 MG TAB	0000	0.44150	08/05/2015
OLANZAPINE 15 MG TAB RAPDIS	**0000**	**3.32691**	**05/05/2016**
OLANZAPINE 2.5 MG TAB	0000	0.11700	08/05/2015
OLANZAPINE 20 MG TAB	0000	0.59200	08/05/2015
OLANZAPINE 20 MG TAB RAPDIS	**0000**	**4.49273**	**05/05/2016**
OLANZAPINE 5 MG TAB	0000	0.16900	08/05/2015
OLANZAPINE 5 MG TAB RAPDIS	0000	1.96053	02/05/2016
OLANZAPINE 7.5 MG TAB	0000	0.25700	08/05/2015
OLOPATADINE HCL 0.1 % DROPS	**0000**	**8.19060**	**05/05/2016**
OMEGA-3 ACID ETHYL ESTERS 1 G CAPSULE	0000	1.44191	12/05/2015
OMEPRAZOLE 10 MG CAP DR	0000	0.45661	09/05/2015
OMEPRAZOLE 20 MG CAP	0000	0.06691	08/05/2015
OMEPRAZOLE 20 MG TAB DR	0000	0.69090	03/05/2015
OMEPRAZOLE 40 MG CAP DR	0000	0.19746	09/05/2015
OMEPRAZOLE MAGNESIUM 20 MG TAB DR	0000	0.72762	12/05/2015
OMEPRAZOLE-BICARB 40-1,100 CAP	0000	17.56296	08/05/2015
ONDANSETRON 4 MG/5 ML SOLN	0000	0.69840	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
ONDANSETRON HCL 2 MG/ML VIAL	**0000**	**0.23325**	**05/05/2016**
ONDANSETRON HCL 4 MG TAB	**0000**	**0.17416**	**05/05/2016**
ONDANSETRON HCL 4 MG/2 ML VIAL	**0000**	**0.30060**	**05/05/2016**
ONDANSETRON HCL 8 MG TAB	0000	0.38188	09/05/2015
ONDANSETRON ODT 4 MG TAB	0000	0.57037	08/05/2015
ONDANSETRON ODT 8 MG TAB	0000	0.55500	08/05/2015
ORPHENADRINE 100 MG TAB SA	0000	0.63111	08/05/2015
OXAPROZIN 600 MG TAB	0000	2.93323	10/05/2015
OXAZEPAM 10 MG CAP	0000	0.79977	10/05/2015
OXAZEPAM 15 MG CAP	0000	0.92073	09/05/2015
OXAZEPAM 30 MG CAP	0000	1.87115	09/05/2015
OXCARBAZEPINE 150 MG TAB	0000	0.20290	07/30/2015
OXCARBAZEPINE 300 MG TAB	0000	0.22425	08/05/2015
OXCARBAZEPINE 300 MG/5 ML ORAL SUSP	0000	0.86034	08/05/2015
OXCARBAZEPINE 600 MG TAB	0000	0.47429	11/05/2015
OXYBUTYNIN 5 MG TAB	0000	0.44925	08/05/2015
OXYBUTYNIN 5 MG/5 ML SYRP	0000	0.02622	08/05/2015
OXYBUTYNIN CL ER 10 MG TAB	0000	1.29588	08/05/2015
OXYBUTYNIN CL ER 15 MG TAB	0000	1.32840	08/05/2015
OXYBUTYNIN CL ER 5 MG TAB	0000	1.06845	11/05/2015
OXYCODON-ACETAMINOPHEN 2.5-325	0000	2.22360	08/05/2015
OXYCODONE 20 MG/ML SOLN	0000	7.25275	03/05/2016
OXYCODONE HCL 10 MG TAB	0000	0.22800	08/05/2015
OXYCODONE HCL 15 MG TAB	0000	0.24300	08/05/2015
OXYCODONE HCL 20 MG TAB	0000	0.55295	09/05/2015
OXYCODONE HCL 30 MG TAB	0000	0.48600	07/30/2015
OXYCODONE HCL 5 MG CAP	0000	1.41447	03/05/2016
OXYCODONE HCL 5 MG TAB	0000	0.18598	08/05/2015
OXYCODONE HCL 5 MG/5 ML SOLUTION	0000	0.31884	08/05/2015
OXYCODONE-ASPIRIN 4.83-325 MG	0000	1.17085	08/05/2015
OXYCODONE/APAP 10/325 MG TAB	0000	0.72622	09/05/2015
OXYCODONE/APAP 5/325 MG TAB	0000	0.19380	08/05/2015
OXYCODONE/APAP 7.5/325 MG TAB	0000	0.60813	11/05/2015
OXYMORPHONE HCL 10 MG TAB	0000	2.68645	11/05/2015
OXYMORPHONE HCL 10 MG TAB ER 12H	0000	3.56896	11/05/2015
OXYMORPHONE HCL 20 MG TAB ER 12H	0000	6.37126	04/05/2016
OXYMORPHONE HCL 30 MG TAB ER 12H	0000	8.69687	03/05/2016
OXYMORPHONE HCL 40 MG TAB ER 12H	0000	12.81647	08/05/2015
OXYMORPHONE HCL 5 MG TAB	0000	1.80855	02/05/2016
OXYMORPHONE HCL 7.5 MG TAB ER 12H	0000	2.68108	11/05/2015
OXYMORPHONE HCL ER 15 MG TAB	0000	5.30210	11/05/2015
PAMIDRONATE DISODIUM 30MG/10ML VIAL	0000	1.64060	12/05/2014
PANTOPRAZOLE SOD 40 MG TAB DR	0000	0.09943	08/05/2015
PANTOPRAZOLE SODIUM 20MG TAB DR	0000	0.12330	09/05/2015
PARICALCITOL 1 MCG CAP	0000	6.07482	04/05/2016
PARICALCITOL 2 MCG CAPSULE	0000	11.46764	02/05/2016
PAROXETINE 37.5 MG TAB SR 24H	0000	4.83136	02/05/2016
PAROXETINE HCL 10 MG TAB	0000	0.11490	08/05/2015
PAROXETINE HCL 12.5 MG TAB SR 24H	0000	6.08990	03/05/2016

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PAROXETINE HCL 20 MG TAB	**0000**	**0.10416**	**05/05/2016**
PAROXETINE HCL 25 MG TAB SR 24H	0000	5.03041	12/05/2015
PAROXETINE HCL 30 MG TAB	**0000**	**0.14148**	**05/05/2016**
PAROXETINE HCL 40 MG TAB	0000	0.16001	08/05/2015
PEG 3350/ELECTROLYTE SOLN (COLYTE)	0000	0.00374	08/05/2015
PEG 3350/ELECTROLYTE SOLN (GOLYTELY)	0000	0.00478	08/05/2015
PEG 3350/FLAVOR PACKS - NULYTELY	0000	0.00521	08/05/2015
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0000	0.04182	09/05/2015
PENICILLIN V POTASSIUM 125 MG/5 ML SUSP RECON	0100	0.07767	09/05/2015
PENICILLIN V POTASSIUM 250MG TAB	0000	0.15191	09/05/2015
PENICILLIN V POTASSIUM 250MG/5ML SOLN	0000	0.04949	09/05/2015
PENICILLIN V POTASSIUM 500MG TAB	0000	0.22648	09/05/2015
PENTAZOCINE HCL/NALOXONE HCL 50-0.5MG TAB	0000	2.44383	11/05/2015
PENTOXIFYLLINE 400 MG TAB SA	0000	0.21588	08/05/2015
PERINDOPRIL ERBUMINE 4 MG TAB	0000	0.66866	09/05/2015
PERINDOPRIL ERBUMINE 8 MG TAB	0000	0.68100	08/05/2015
PERMETHRIN 5% CRM	0000	1.72395	08/05/2015
PERPHEN/AMITRIP 2/25 MG TAB	0000	1.38516	11/05/2015
PERPHEN/AMITRIP 4/25 MG TAB	0000	1.59414	09/05/2015
PERPHENAZINE 16 MG TAB	0000	2.37690	11/05/2015
PERPHENAZINE 2 MG TAB	0000	1.03375	09/05/2015
PERPHENAZINE 4 MG TAB	0000	1.79140	09/05/2015
PERPHENAZINE 8 MG TAB	0000	1.97063	11/05/2015
PHENAZOPYRIDINE HCL 100 MG TABLET	0000	1.18800	03/05/2015
PHENAZOPYRIDINE HCL 200 MG TABLET	0000	2.10000	03/05/2015
PHENYTOIN 125 MG/5 ML SUSP	0000	0.13817	08/05/2015
PHENYTOIN 50 MG CHEW TAB	0000	0.60445	08/05/2015
PHENYTOIN SOD EXT 100 MG CAP	0000	0.35057	08/05/2015
PHENYTOIN SODIUM EXTENDED 30 MG CAP	0000	0.70716	08/05/2015
PILOCARPINE 4% EYE DROPS	0000	7.80000	03/05/2015
PILOCARPINE HCL 5 MG TAB	0000	1.42457	11/05/2015
PILOCARPINE HCL 7.5 MG TAB	**0000**	**1.91220**	**05/05/2016**
PINDOLOL 10 MG TAB	0000	1.57973	09/05/2015
PINDOLOL 5 MG TAB	0000	1.27187	11/05/2015
PIOGLITAZONE - METFORMIN 15 MG-850 MG TAB	0000	2.03126	08/05/2015
PIOGLITAZONE HCL 15 MG TAB	0000	0.17000	08/05/2015
PIOGLITAZONE HCL 30 MG TAB	0000	0.17415	08/05/2015
PIOGLITAZONE HCL 45 MG TAB	0000	0.26250	08/05/2015
PIOGLITAZONE- METFORMIN 15 MG- 500 MG TAB	0000	2.03126	08/05/2015
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	15.22500	03/05/2015
PIPERACILLIN SODIUM/TAZOBACTAM 40.5 G VIAL	0000	177.73350	03/05/2015
PIROXICAM 10 MG CAP	0000	1.12125	08/05/2015
PIROXICAM 20 MG CAP	0000	2.32114	08/05/2015
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

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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 #18/FE,CARB./FA/DSS 90-1-50MG TAB	0000	0.14000	05/04/2012
PNV #19/IRON PS&HEME/FOLIC/DHA 22-6-1-200 CAPSULE	0000	0.14000	05/04/2012
PNV #21 WITH IRON/FA 28-6-1MG TAB	0000	0.14000	05/04/2012
PNV #22/FE/FA/OMEGA-3/DHA 28-6-1-203MG COMB. PK	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 #38/FE CARB&GLUCON/FA/DSS/DHA 35-1-50MG COMB. PK	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 #70/FE FUM/FA/DHA 28-1-250MG 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 #79/FE FUM/FA/LMEFOLATE CA/DHA 27-1.13MG CAP	0000	0.14000	05/04/2012
PNV #8/FE PS CMPLX & ASPGL/FA/DHA 22-6-1-200 COMB. PK	0000	0.14000	05/04/2012
PNV #8/IRON PS & HEME POLYP/FA 22-6-1MG TABLET	0000	0.14000	05/04/2012
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 #35/FE CARB,ASP GLY/FA/DSS/OMEGA-3 27-1-50MG CAP	0000	0.14000	05/04/2012
PNV - CA #37/FE CARB,ASP GLY/FA/OMEGA-3 27-1-330MG CAP	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 #64/FE CARB&GLUC/FA/DSS/DHA 90-1-300MG COMB. PK	0000	0.14000	05/04/2012
PNV - CA #68/FE/FA/DHA 28-1-300MG CAP	0000	0.14000	05/04/2012
PNV - CA #69/FE CARB/FA/DSS/DHA 27-1-50MG 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 18/FE,CARB/FA/DSS/UBI/DHA 15-0.5-25 TABLET	0000	0.14000	05/04/2012
PNV CMB#21/IRON/FOLIC ACID 14 MG-400 TABLET	0000	0.14000	05/04/2012
PNV COMB NO.3/IRON FUM&GLUC/FA 20MG-0.8MG TABLET	0000	0.14000	05/04/2012
PNV COMB.NO43/IRON,CARB/FA/DSS 29-1-50 MG TABLET DR	0000	0.14000	05/04/2012
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.122/IRON/FOLIC ACID 27MG-0.8MG TABLET	0000	0.14000	05/29/2015
PNV NO.15/IRON FUM & PS CMP/FA 85 MG-1 MG CAPSULE	0000	0.14000	05/04/2012
PNV NO.23-IRON PS COMPLEX-FA 155 MG-1MG CAPSULE	0000	0.14000	05/04/2012
PNV NO.25/IRON FUMARATE/FA/DHA 30-975-200 CAPSULE	0000	0.14000	05/04/2012
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

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
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.80/IRON/MFOLATE/DSS/DHA 38-1-25 MG CAPSULE	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 NO.86/IRON/MFOLATE/DSS/DHA 38-1-50 MG COMBO. PKG	0000	0.14000	05/29/2015
PNV NO.88/IRON PS,HEME/FA/DHA 28-6-1 MG COMBO. PKG	0000	0.14000	05/29/2015
PNV NO.90/IRON FUM & PS/FA/DHA 32-1.25 MG CAPSULE	0000	0.14000	05/29/2015
PNV NO10/IRON FUM&P/FA/OMEGA-3 30-1-310.1 CAPSULE	0000	0.14000	05/04/2012
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 COMBO.11/IRON/FA 65 MG-1 MG TABLET	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 CA,NO.74/IRON/FA 27 MG-1 MG TABLET	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 WITHOUT FE/FA/CA CARB/B6/B12 1-200-75MG 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#20/IRON/FA/DS/FISH/DHA/EPA 27-1-500MG CAPSULE	0000	0.14000	05/04/2012
PNV#24/IRON AA CHEL/FA/DHA 30-975-300 COMBO. PKG	0000	0.14000	05/04/2012
PNV#24/IRON AA CHEL/FOLIC ACID 30 MG-975 TABLET	0000	0.14000	05/04/2012
PNV#64/IRON/LMFOLATE/ALGAL/SOY 27-1.13 MG CAPSULE	0000	0.14000	09/05/2013
PNV#64/IRON/LMFOLATE/ALGAL/SOY 27-1.13 MG CAPSULE	0000	0.14000	06/05/2014
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 CARB/GINGER 1.2-42 MG TABLET	0000	0.14000	12/05/2013
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/FE/FA/DHA/EPA/OTHER OM3 27 MG-1 MG CMB TAB CP	0000	0.14000	09/05/2013
PNV105/IRON/FA/OMEGA 3/DHA/EPA 27-1-380MG CMBPKGDRCP	0000	0.14000	03/05/2013
PNV106/IRON/FA/OM3/DHA/EPA 25-1-400MG COMBO. PKG	0000	0.14000	08/03/2012
PNV106/IRON/FA/OM3/DHA/EPA 25-1-430MG COMBO. PKG	0000	0.14000	08/03/2012
PNV107/IRON/FA/OM3/DHA/EPA 25-1-400MG CMBPKGDRCP	0000	0.14000	08/03/2012
PNV107/IRON/FA/OM3/DHA/EPA 25-1-430MG CMBPKGDRCP	0000	0.14000	08/03/2012
PNV110/IRON/FA/OMEGA 3/DHA/EPA 26-1-278MG COMBO. PKG	0000	0.14000	12/05/2012
PNV113/IRON/FA/OMEGA-3/DHA/EPA 24-1-272MG COMBO. PKG	0000	0.14000	09/05/2013
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
PNV119/IRON FUMARATE/FA/DSS 29-1-25 MG TABLET	0000	0.14000	05/29/2015
PNV123/IRON CAR/FA/OM3/DHA/EPA 28-800-235 CAPSULE	0000	0.14000	05/29/2015
PNV17/IRON/FA/FISH OIL/DHA/OM 35-5-1.2MG CAPSULE	0000	0.14000	05/04/2012

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PNV19/IRON BG HC&SUCC-P/FA/OM3 29-1-400MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV22/IRON CBN&GLUC/FA/DSS/DHA 27-1-50 MG COMBO. PKG	0000	0.14000	05/04/2012
PNV34/IRON,CARB&FUM/FA/DSS/DHA 27-1-50 MG CAPSULE	0000	0.14000	05/29/2015
PNV34/IRON,CARBONYL/FA/DSS/DHA 29-1-50 MG CAPSULE	0000	0.14000	09/05/2013
PNV50/IRON FUM&BISGLYCINATE/FA 25 MG-1 MG TABLET	0000	0.14000	08/03/2012
PNV51/IRON FUM/FA/OM-3/DHA/EPA 27-800-228 CAPSULE	0000	0.14000	08/03/2012
PNV53/IRON FUM/FA/DOCUSATE/DHA 29-1.25-55 CAPSULE	0000	0.14000	09/05/2012
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
PNV59/IRON,CARBONYL/FA/DSS/DHA 29-1-50 MG CAPSULE	0000	0.14000	03/05/2013
PNV62/FA/OM3/DHA/EPA/FISH OIL 400-35-25 TAB CHEW	0000	0.14000	05/29/2015
PNV66/IRON FUMARATE/FA/DSS/DHA 26-1.2-55 CAPSULE	0000	0.14000	05/04/2012
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
PNV82/FEPS/FA/OM3/DHA/EPA/FISH 13.5-0.5MG TABLET DR	0000	0.14000	05/04/2012
PNV94/SOD IRON EDTA& PS/FA/OM3 26-1-374MG CMBPKGDRCP	0000	0.14000	05/04/2012
PNV95/FERROUS FUMARATE/FA 28MG-0.8MG TABLET	0000	0.14000	05/04/2012
PODOFILOX 0.5 % SOLN	0000	15.21926	04/05/2016
POLYETHYLENE GLYCOL 3350 17 GRAM POWD PK	0000	1.29567	12/05/2015
POLYETHYLENE GLYCOL 3350 17 GRAM/DOSE PWDR	**0000**	**0.02895**	**05/05/2016**
POLYMYXIN B/TMP EYE DROPS	0000	0.96145	09/05/2015
POTASSIUM BICARBONATE/CIT AC 25MEQ TAB EFF	0000	0.57968	02/05/2016
POTASSIUM CHLORIDE 20 MEQ PK	0000	1.44156	03/05/2016
POTASSIUM CHLORIDE 8 MEQ CAP SA	0000	0.68633	09/05/2015
POTASSIUM CITRATE 15 MEQ TABLET ER	0000	2.39868	04/05/2016
POTASSIUM CITRATE ER 10 MEQ TAB	0000	1.76258	11/05/2015
POTASSIUM CL 10 MEQ CAP SA	0000	0.55485	08/05/2015
POTASSIUM CL 10 MEQ TAB SA	0000	0.36970	08/05/2015
POTASSIUM CL 10 MEQ TAB SA PRT	0000	0.36908	08/05/2015
POTASSIUM CL 10% LIQUID	0000	0.32489	09/06/2015
POTASSIUM CL 20 MEQ TAB SA	**0000**	**0.32486**	**05/05/2016**
POTASSIUM CL 20% LIQUID	0000	0.55833	01/05/2016
POTASSIUM CL 8 MEQ TAB SA	0000	0.47805	08/05/2015
PRAMIPEXOLE DI-HCL 0.125 MG TAB	0000	0.09984	08/05/2015
PRAMIPEXOLE DI-HCL 0.25 MG TAB	0000	0.08159	09/05/2015
PRAMIPEXOLE DI-HCL 0.5 MG TAB	0000	0.14324	08/05/2015
PRAMIPEXOLE DI-HCL 0.75 MG TAB	0000	0.14757	09/05/2015
PRAMIPEXOLE DI-HCL 1 MG TAB	**0000**	**0.09650**	**05/05/2016**
PRAMIPEXOLE DI-HCL 1.5 MG TAB	0000	0.10200	08/05/2015
PRAVASTATIN SODIUM 10 MG TAB	0000	0.41145	08/05/2015
PRAVASTATIN SODIUM 20 MG TAB	0000	0.29412	12/05/2015
PRAVASTATIN SODIUM 40 MG TAB	0000	0.48014	11/05/2015
PRAVASTATIN SODIUM 80 MG TAB	0000	0.62985	08/05/2015
PRAZOSIN 1 MG CAP	0000	0.53219	03/05/2016
PRAZOSIN 2 MG CAP	0000	0.81745	11/05/2015
PRAZOSIN HCL 5 MG CAP	0000	1.27390	11/06/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PREDNISOLONE 15 MG/5 ML SOLN	0000	0.11009	08/05/2015
PREDNISOLONE 15 MG/5 ML SYRP	0000	0.08665	09/05/2015
PREDNISOLONE 6.7 MG/5 ML SOLN	0000	0.79125	12/05/2015
PREDNISOLONE AC 1% EYE DROPS	0000	9.31840	04/05/2016
PREDNISOLONE SOD 1% DROPS	0000	5.60160	08/05/2015
PREDNISONE 1 MG TAB	0000	0.15572	09/05/2015
PREDNISONE 10 MG TAB	0000	0.16441	08/05/2015
PREDNISONE 10 MG TAB - UNIPAK	0000	1.06363	09/05/2015
PREDNISONE 2.5 MG TAB	0000	0.16999	08/05/2015
PREDNISONE 20 MG TAB	0000	0.24629	08/05/2015
PREDNISONE 5 MG TAB	0000	0.18837	08/05/2015
PREDNISONE 5 MG TAB - UNIPAK	0000	0.53993	08/05/2015
PREDNISONE 50 MG TAB	0000	0.35536	08/05/2015
PRENATAL #103/IRON FUMARATE/FA 27 MG-1 MG TABLET	0000	0.14000	07/05/2012
PRENATAL #48/IRON CB&GLU/FA/B6 20-1-25 MG TABLET SEQ	0000	0.14000	07/05/2012
PRENATAL #57/IRON/FA/DSS/DHA 29-1.25-55 CAPSULE	0000	0.14000	03/05/2013
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 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.13/IRON PS/FA CB#1 29 MG-1 MG TAB CHEW	0000	0.14000	05/29/2015
PRENATAL NO.25/IRON/FA #6/DHA 30-1-200MG CAPSULE	0000	0.14000	05/04/2012
PRENATAL NO.39/IRON/FA #6/DHA 30-1-300MG COMBO. PKG	0000	0.14000	05/04/2012
PRENATAL NO.40/IRON/FA/DHA 27-0.8-250 CAPSULE	0000	0.14000	05/04/2012
PRENATAL NO.52/IRON/FA/DHA 28-1-200MG CAPSULE	0000	0.14000	09/05/2012
PRENATAL NO.75/IRON/FOLATE #1 18 MG-1 MG TABLET	0000	0.14000	05/29/2015
PRENATAL NO.77/IRON ASP GLY/FA 20 MG-1 MG TABLET	0000	0.14000	05/29/2015
PRENATAL NO.93/IRON/FA #9/DHA 31 MG IRON-1 MG-200 MG CAPSULE	0000	0.14000	08/05/2015
PRENATAL VIT #108/IRON/FA 30-0.8MG TABLET	0000	0.14000	09/05/2012
PRENATAL VIT #49/IRON FUM/FA 6.75-0.2MG TABLET	0000	0.14000	07/05/2012
PRENATAL VIT #60/IRON FUM/FA 27 MG-1 MG TABLET	0000	0.14000	09/05/2013
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 16/IRON CB/FA/DSS 90-1-50 MG TABLET	0000	0.14000	05/04/2012
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.114/FA/GINGER 1MG-500MG TABLET	0000	0.14000	09/05/2013
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.128/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.131/IRON/FA 28MG-0.8MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT NO.44/IRON/FA/DHA 29-1-350MG CAPSULE	0000	0.14000	06/05/2012
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

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PRENATAL VIT#101/IRON/FA/DHA 27-800-200 COMBO. PKG	0000	0.14000	06/05/2012
PRENATAL VIT#4/IRON FUM &PS/FA 106 MG-1MG CAPSULE	0000	0.14000	05/04/2012
PRENATAL VIT#42/FA CMB#6 1 MG TAB CHEW	0000	0.14000	05/04/2012
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#96/FERROUS FUM/FA 27MG-0.8MG TABLET	0000	0.14000	05/29/2015
PRENATAL VIT#98/FERROUS FUM/FA 9MG-267MCG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT/FE FUMARATE/FA 15 MG-1 MG TAB	0000	0.14000	05/04/2012
PRENATAL VIT/IRON BISGLYCIN/FA 29 MG-1 MG 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 VIT/IRON FUMARATE/FA 66-1MG TABLET	0000	0.14000	05/04/2012
PRENATAL VIT/IRON FUMARATE/FA 75-1MG TABLET	0000	0.14000	05/04/2012
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 #90/IRON FUM/FA 9 MG-0.5MG TABLET	0000	0.14000	05/04/2012
PRENATAL VITS #93/IRON FUM/FA 9MG-267MCG TABLET	0000	0.14000	05/04/2012
PRENATAL VITS#4/IRON FUM/FA 106 MG-1MG CAPSULE	0000	0.14000	05/04/2012
PRIMIDONE 250 MG TAB	0000	0.17937	08/05/2015
PRIMIDONE 50 MG TAB	0000	0.11260	08/05/2015
PROBENECID 500 MG TAB	0000	0.69668	11/05/2015
PROCHLORPERAZINE 10 MG TAB	**0000**	**0.11055**	**05/05/2016**
PROCHLORPERAZINE 25 MG SUPP	0000	9.28001	09/05/2015
PROCHLORPERAZINE 5 MG TAB	**0000**	**0.12281**	**05/05/2016**
PROGESTERONE OIL 50 MG/ML VL	**0000**	**2.51150**	**05/05/2016**
PROGESTERONE,MICRONIZED 100 MG CAP	0000	1.22400	08/05/2015
PROGESTERONE,MICRONIZED 200 MG CAP	0000	3.00360	08/05/2015
PROMETHAZINE 25 MG SUPP	0000	13.35847	11/05/2015
PROMETHAZINE 25 MG TAB	0000	0.06023	08/05/2015
PROMETHAZINE 25 MG/ML AMP	0000	1.94873	12/05/2015
PROMETHAZINE 25 MG/ML VIAL	0000	1.08150	03/05/2015
PROMETHAZINE 50 MG TAB	**0000**	**0.20197**	**05/05/2016**
PROMETHAZINE 6.25/5 ML SYRP	0000	0.02235	09/05/2015
PROMETHAZINE HCL 12.5 MG SUPP	0000	10.16131	04/05/2016
PROMETHAZINE HCL 12.5 MG TAB	0000	0.10950	08/05/2015
PROMETHAZINE HCL 50 MG/ML AMP	0000	3.49753	12/05/2015
PROMETHAZINE VC SYRP	0000	0.27529	12/05/2015
PROPAFENONE HCL 150 MG TAB	0000	0.27035	08/05/2015
PROPAFENONE HCL 225 MG TAB	0000	0.30150	08/05/2015
PROPAFENONE HCL 300 MG TAB	0000	1.51413	04/05/2016
PROPRANOLOL 10 MG TAB	0000	0.25636	12/05/2015
PROPRANOLOL 120 MG CAP SA	0000	2.87128	12/05/2015
PROPRANOLOL 160 MG CAP SA	0000	3.82455	03/05/2016
PROPRANOLOL 20 MG TAB	**0000**	**0.29772**	**05/05/2016**
PROPRANOLOL 40 MG TAB	0000	0.47109	08/15/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
PROPRANOLOL 60 MG CAP SA	**0000**	**1.51805**	**05/05/2016**
PROPRANOLOL 60 MG TAB	0000	1.08644	11/05/2015
PROPRANOLOL 80 MG CAP SA	0000	1.77172	12/05/2015
PROPRANOLOL 80 MG TAB	0000	0.61965	12/05/2015
PROPYLTHIOURACIL 50 MG TAB	0000	0.90883	11/05/2015
PROTRIPTYLINE HCL 10 MG TAB	0000	2.32490	11/05/2015
PV W-O CAL/FE,CARBONYL/DOSS/FA 29-50-1MG TABLET	0000	0.14000	05/04/2012
PV W-O CAL/FE,CARBONYL/DOSS/FA 29-50-1MG TABLET DR	0000	0.14000	05/04/2012
PV W-O CAL/FERROUS FUMARATE/FA 27/1 MG TAB	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	1.01807	02/05/2016
PYRIDOSTIGMINE BROMIDE 180 MG TAB ER	**0000**	**16.76364**	**05/05/2016**
QUETIAPINE FUMARATE 100 MG TAB	0000	0.17280	08/05/2015
QUETIAPINE FUMARATE 200 MG TAB	0000	0.24723	08/05/2015
QUETIAPINE FUMARATE 25 MG TAB	0000	0.08305	08/05/2015
QUETIAPINE FUMARATE 300 MG TAB	0000	0.41460	09/05/2015
QUETIAPINE FUMARATE 400 MG TAB	0000	0.35295	08/05/2015
QUETIAPINE FUMARATE 50 MG TAB	0000	0.12738	08/05/2015
QUINAPRIL HCL 5 MG TAB	0000	0.16048	12/05/2015
QUINAPRIL HCL 10 MG TAB	0000	0.19934	08/05/2015
QUINAPRIL HCL 20 MG TAB	0000	0.22502	08/05/2015
QUINAPRIL HCL 40 MG TAB	0000	0.21889	08/05/2015
QUINAPRIL/HCTZ 10/12.5 MG TAB	0000	0.86867	11/05/2015
QUINAPRIL/HCTZ 20/12.5 MG TAB	0000	0.68784	08/05/2015
QUINAPRIL/HCTZ 20/25 MG TAB	0000	0.76843	09/05/2015
QUININE SULFATE 324 MG CAP	0000	5.68543	04/05/2016
RABEPRAZOLE SODIUM 20 MG TABLET DR	0000	0.77627	09/05/2015
RALOXIFENE HCL 60 MG TAB	0000	4.14081	09/05/2015
RAMIPRIL 1.25 MG CAP	0000	0.31901	08/05/2015
RAMIPRIL 10 MG CAP	0000	0.11673	09/05/2015
RAMIPRIL 2.5 MG CAP	**0000**	**0.09390**	**05/05/2016**
RAMIPRIL 5 MG CAP	**0000**	**0.10433**	**05/05/2016**
RANITIDINE 150 MG CAP	0000	0.81766	12/05/2015
RANITIDINE 150 MG TAB	**0000**	**0.07064**	**05/05/2016**
RANITIDINE 150 MG/10 ML SYRP	**0000**	**0.03548**	**05/05/2016**
RANITIDINE 300 MG TAB	0000	0.14027	08/05/2015
REPREXAIN 10-200 MG TAB	**0000**	**3.46748**	**05/05/2016**
RIBAVIRIN 200 MG CAP	0000	1.12800	06/05/2015
RIBAVIRIN 200 MG TAB	0000	0.70458	11/05/2015
RIFAMPIN 150 MG CAP	0000	1.32105	08/05/2015
RIFAMPIN 300 MG CAP	0000	1.05392	08/05/2015
RILUZOLE 50 MG TAB	0000	3.32677	10/05/2015
RISEDRONATE SODIUM 150 MG TABLET	0000	130.61069	04/05/2016
RISPERIDONE 0.25MG TAB	0000	0.06772	01/05/2016
RISPERIDONE 0.5 MG TAB ODT	0000	1.08510	11/05/2015
RISPERIDONE 0.5MG TAB	0000	0.08481	03/05/2016
RISPERIDONE 1 MG TAB RAPDIS	0000	1.24055	02/05/2016
RISPERIDONE 1MG TAB	**0000**	**0.09397**	**05/05/2016**
RISPERIDONE 1MG/ML SOLN	0000	0.47550	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
RISPERIDONE 2 MG TAB ODT	0000	2.17010	04/05/2016
RISPERIDONE 2MG TAB	**0000**	**0.10309**	**05/05/2016**
RISPERIDONE 3 MG TAB RAPDIS	0000	5.23365	03/05/2016
RISPERIDONE 3MG TAB	0000	0.12767	09/05/2015
RISPERIDONE 4MG TAB	0000	0.14975	12/05/2015
RISPERIDONE M-TAB 4 MG ODT	**0000**	**7.24434**	**05/05/2016**
RIVASTIGMINE TARTRATE 1.5 MG CAP	0000	1.37126	01/05/2016
RIVASTIGMINE TARTRATE 3 MG CAP	**0000**	**1.39100**	**05/05/2016**
RIVASTIGMINE TARTRATE 4.5 MG CAP	**0000**	**1.61426**	**05/05/2016**
RIVASTIGMINE TARTRATE 6 MG CAP	0000	1.37126	01/05/2016
RIZATRIPTAN BENZOATE 10 MG TAB	**0000**	**1.44406**	**05/05/2016**
RIZATRIPTAN BENZOATE 10 MG TAB RAPDIS	0000	1.71076	04/05/2016
RIZATRIPTAN BENZOATE 5 MG TAB	0000	1.88417	08/05/2015
RIZATRIPTAN BENZOATE 5 MG TAB RAPDIS	0000	1.42205	11/05/2015
ROPINIROLE HCL 0.25 MG TAB	0000	0.12962	08/05/2015
ROPINIROLE HCL 0.5 MG TAB	0000	0.11985	08/05/2015
ROPINIROLE HCL 1 MG TAB	0000	0.12720	08/05/2015
ROPINIROLE HCL 12 MG TAB ER 24H	**0000**	**6.72229**	**05/05/2016**
ROPINIROLE HCL 2 MG TAB	0000	0.17582	08/05/2015
ROPINIROLE HCL 2 MG TAB ER 24H	0000	1.91350	02/05/2016
ROPINIROLE HCL 3 MG TAB	0000	0.18256	08/05/2015
ROPINIROLE HCL 4 MG TAB	0000	0.17591	08/05/2015
ROPINIROLE HCL 4 MG TAB ER 24H	0000	3.82500	04/05/2016
ROPINIROLE HCL 5 MG TAB	0000	0.18630	08/05/2015
ROPINIROLE HCL 6 MG TAB ER 24H	**0000**	**5.27494**	**05/05/2016**
ROPINIROLE HCL 8 MG TAB ER 24H	0000	5.73645	01/05/2016
SALICYLIC ACID 6% SHAMPOO	0000	0.16692	04/05/2016
SALSALATE 500MG TAB	0000	0.97500	06/05/2015
SELEGILINE HCL 5 MG CAP	0000	2.30625	08/05/2015
SELEGILINE HCL 5 MG TAB	0000	1.71158	12/05/2015
SERTRALINE 20 MG/ML ORAL CONC	0000	1.16025	12/05/2015
SERTRALINE HCL 100 MG TAB	0000	0.07582	09/05/2015
SERTRALINE HCL 25 MG TAB	0000	0.05472	09/05/2015
SERTRALINE HCL 50 MG TAB	0000	0.06220	08/05/2015
SILDENAFIL CITRATE 20 MG TAB	0000	0.58772	08/05/2015
SILVER SULFADIAZINE 1% CRM	0000	0.19132	08/05/2015
SIMVASTATIN 10 MG TAB	0000	0.02438	08/05/2015
SIMVASTATIN 20 MG TAB	0000	0.02134	08/05/2015
SIMVASTATIN 40 MG TAB	0000	0.04080	08/05/2015
SIMVASTATIN 5 MG TAB	0000	0.05825	08/05/2015
SIMVASTATIN 80 MG TAB	0000	0.10109	08/05/2015
SODIUM BICARBONATE 650 MG TAB	0000	0.01604	01/05/2016
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

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
SODIUM CHLORIDE 0.9% SOLN	0025	0.08010	09/05/2014
SODIUM CHLORIDE 0.9% VIAL	**0000**	**0.07510**	**05/05/2016**
SODIUM FLUORIDE 0.25MG TAB CHEW	0000	0.07909	01/05/2016
SODIUM FLUORIDE 0.5 MG/ML DROPS	0000	0.20400	03/05/2015
SODIUM FLUORIDE 1.1 % CRM	0000	0.10800	03/05/2015
SODIUM POLYSTYRENE SULF PWDR	0000	0.22800	06/05/2015
SODIUM POLYSTYRENE SULFONATE 15GM/60ML SUSP	0000	0.21644	08/05/2015
SOTALOL HCL 120 MG TAB	0000	0.24323	09/05/2015
SOTALOL HCL 160 MG TAB	0000	0.36695	03/05/2016
SOTALOL HCL 80 MG TAB	0000	0.12088	09/05/2015
SPIRONOLACT/HCTZ 25/25 MG TAB	0000	1.28780	11/05/2015
SPIRONOLACTONE 100 MG TAB	**0000**	**0.44340**	**05/05/2016**
SPIRONOLACTONE 25 MG TAB	0000	0.08790	08/05/2015
SPIRONOLACTONE 50 MG TAB	0000	0.21233	08/05/2015
STAVUDINE 40 MG CAP	0000	0.91474	09/05/2015
SUCRALFATE 1 GM TAB	0000	0.24861	09/05/2015
SULFACETAMIDE 10% EYE DROPS	0000	3.57899	11/05/2015
SULFACETAMIDE SODIUM/SULFUR 10 %-5 % MED. PAD	0000	7.66120	07/17/2015
SULFACETAMIDE/PREDNISOLONE SP 10%-0.23% EYE DROPS	0000	2.83350	08/05/2015
SULFAMETHOXAZOLE/TMP DS TAB	**0000**	**0.14881**	**05/05/2016**
SULFAMETHOXAZOLE/TMP SS TAB	0000	0.14158	10/05/2015
SULFAMETHOXAZOLE/TMP SUSP	0000	0.29090	11/05/2015
SULFASALAZINE 500 MG TAB	**0000**	**0.19109**	**05/05/2016**
SULFASALAZINE DR 500 MG TAB	0000	0.41113	08/05/2015
SULINDAC 150 MG TAB	0000	0.22575	08/05/2015
SULINDAC 200 MG TAB	0000	0.27630	08/05/2015
SUMATRIPTAN 20 MG NASAL SPRY	0000	52.22418	01/05/2016
SUMATRIPTAN 4 MG/0.5 ML KIT	0000	230.15856	01/05/2016
SUMATRIPTAN 5 MG NASAL SPRAY	0000	46.96655	04/05/2016
SUMATRIPTAN SUCC 100 MG TAB	0000	0.92834	08/05/2015
SUMATRIPTAN SUCC 25 MG TAB	**0000**	**1.13272**	**05/05/2016**
SUMATRIPTAN SUCC 50 MG TAB	0000	0.95595	08/05/2015
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML KIT-REFILL	0000	143.63100	03/05/2016
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML PEN IJ KIT	**0000**	**150.73746**	**05/05/2016**
SUMATRIPTAN SUCCINATE 6 MG/0.5 ML VIAL	**0000**	**77.89522**	**05/05/2016**
TACROLIMUS 0.03 % OINT. (G)	0000	7.11571	04/05/2016
TACROLIMUS 0.1 % OINT. (G)	0000	7.14036	04/05/2016
TACROLIMUS 0.5 MG CAP	0000	0.65165	11/05/2015
TACROLIMUS 1 MG CAP	0000	0.85731	03/05/2016
TAMOXIFEN 10 MG TAB	0000	0.36492	08/05/2015
TAMOXIFEN 20 MG TAB	0000	0.76245	08/05/2015
TAMSULOSIN HCL 0.4 MG CAP SR 24H	0000	0.35951	08/05/2015
TELMISARTAN 20 MG TAB	0000	1.03601	08/05/2015
TELMISARTAN 40 MG TAB	0000	0.89501	08/05/2015
TELMISARTAN 80 MG TAB	0000	0.74563	08/05/2015
TELMISARTAN/HCTZ 40 MG-12.5 MG TAB	0000	3.42987	03/05/2016
TELMISARTAN/HCTZ 80 MG-12.5 MG TAB	0000	2.99860	03/05/2016
TELMISARTAN/HCTZ 80 MG-25 MG TAB	0000	3.42108	04/05/2016
TEMAZEPAM 15 MG CAP	0000	0.06516	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TEMAZEPAM 22.5 MG CAP	**0000**	**5.60921**	**05/05/2016**
TEMAZEPAM 30 MG CAP	0000	0.08335	08/05/2015
TEMAZEPAM 7.5 MG CAP	0000	5.21290	10/05/2015
TEMOZOLOMIDE 100 MG CAPSULE	**0000**	**187.41150**	**05/05/2016**
TERAZOSIN 1 MG CAP	0000	0.10620	08/05/2015
TERAZOSIN 10 MG CAP	0000	0.06127	08/05/2015
TERAZOSIN 2 MG CAP	0000	0.06679	08/05/2015
TERAZOSIN 5 MG CAP	0000	0.06511	08/05/2015
TERBINAFINE HCL 250 MG TAB	**0000**	**0.18495**	**05/05/2016**
TERBUTALINE SULFATE 2.5 MG TAB	0000	2.13233	08/05/2015
TERBUTALINE SULFATE 5 MG TAB	0000	2.01998	03/05/2016
TERCONAZOLE 0.4% CRM	**0000**	**0.77262**	**05/05/2016**
TERCONAZOLE 0.8% VAG CRM	0000	2.11252	03/05/2016
TERCONAZOLE 80 MG VAG SUPP	**0000**	**28.07654**	**05/05/2016**
TESTOSTERONE 50 MG/5 GRAM (1 %) GEL	**0000**	**2.45850**	**05/05/2016**
TESTOSTERONE CYP 200 MG/ML VIAL	**0000**	**9.30405**	**05/05/2016**
TESTOSTERONE ENAN 200 MG/ML VIAL	0000	14.43112	04/05/2016
TETRACYCLINE 250 MG CAP	0000	6.87960	08/05/2015
TETRACYCLINE 500 MG CAP	0000	12.36473	01/05/2016
THEOPHYLLINE 100 MG TAB SA	0000	0.52445	08/05/2015
THEOPHYLLINE 200 MG TAB SA	0000	0.46290	08/05/2015
THEOPHYLLINE 300 MG TAB SA	0000	0.59666	08/05/2015
THEOPHYLLINE ER 400 MG TAB	0000	1.35615	08/05/2015
THIORIDAZINE 10 MG TAB	0000	0.46500	12/05/2014
THIORIDAZINE 100 MG TAB	0000	0.82276	04/05/2016
THIORIDAZINE 25 MG TAB	0000	0.71773	08/05/2015
THIORIDAZINE 50 MG TAB	0000	0.78751	11/05/2015
THIOTHIXENE 1 MG CAP	0000	0.76500	12/05/2014
THIOTHIXENE 10 MG CAP	0000	2.46120	08/05/2015
THIOTHIXENE 2 MG CAP	**0000**	**1.20588**	**05/05/2016**
THIOTHIXENE 5 MG CAP	0000	1.56010	11/05/2015
TICLOPIDINE 250 MG TAB	0000	2.04020	06/05/2015
TIMOLOL 0.25% EYE DROPS	0000	0.80400	08/05/2015
TIMOLOL 0.25% GEL /SOLN	**0000**	**19.02272**	**05/05/2016**
TIMOLOL 0.5% EYE DROPS	**0000**	**0.76950**	**05/05/2016**
TIMOLOL 0.5% GEL /SOLN	0000	19.92867	04/05/2016
TINIDAZOLE 500 MG TAB	**0000**	**4.71240**	**05/05/2016**
TIZANIDINE HCL 2 MG CAP	0000	2.07384	03/05/2016
TIZANIDINE HCL 2 MG TAB	0000	0.19001	08/05/2015
TIZANIDINE HCL 4 MG CAP	**0000**	**2.60538**	**05/05/2016**
TIZANIDINE HCL 4 MG TAB	0000	0.20383	08/05/2015
TIZANIDINE HCL 6 MG CAP	0000	3.14725	02/05/2016
TOBRAMYCIN 0.3% OPHTH SOLN	0000	1.68403	02/05/2016
TOBRAMYCIN IN 0.225% NACL 300 MG/5ML AMPUL-NEB	0000	16.90097	01/05/2016
TOLTERODINE TARTRATE 1 MG TAB	**0000**	**2.06012**	**05/05/2016**
TOLTERODINE TARTRATE 2 MG CAP ER 24H	0000	6.06385	11/05/2015
TOLTERODINE TARTRATE 2 MG TAB	0000	1.98009	08/05/2015
TOLTERODINE TARTRATE 4 MG CAP ER 24H	0000	4.76661	03/05/2016
TOPIRAMATE 100 MG TAB	0000	0.10891	08/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TOPIRAMATE 15 MG SPRINKLE CAP	0000	0.44951	08/05/2015
TOPIRAMATE 200 MG TAB	0000	0.16525	08/05/2015
TOPIRAMATE 25 MG SPRINKLE CAP	0000	0.66591	09/05/2015
TOPIRAMATE 25 MG TAB	0000	0.04190	08/05/2015
TOPIRAMATE 50 MG TAB	0000	0.09175	08/05/2015
TORSEMIDE 10 MG TAB	0000	0.12794	02/05/2016
TORSEMIDE 100 MG TAB	0000	0.32485	09/05/2015
TORSEMIDE 20 MG TAB	0000	0.13453	09/05/2015
TORSEMIDE 5 MG TAB	0000	0.13753	11/05/2015
TRAMADOL HCL 100 MG TBMP 24HR	0000	2.33824	02/05/2016
TRAMADOL HCL 200 MG TAB.SR 24H	0000	4.35971	08/05/2015
TRAMADOL HCL 300 MG TBMP 24HR	**0000**	**7.08223**	**05/05/2016**
TRAMADOL HCL 50 MG TAB	0000	0.03750	08/05/2015
TRAMADOL HCL ER 100 MG TAB	0000	3.03069	11/05/2015
TRAMADOL HCL ER 300 MG TAB	**0000**	**5.39142**	**05/05/2016**
TRAMADOL/APAP 37.5/325 MG TAB	**0000**	**0.20869**	**05/05/2016**
TRANDOLAPRIL 1 MG TAB	0000	0.34681	09/05/2015
TRANDOLAPRIL 2 MG TAB	0000	0.23260	04/05/2016
TRANDOLAPRIL 4 MG TAB	**0000**	**0.32440**	**05/05/2016**
TRANEXAMIC ACID 650 MG TABLET	0000	3.92525	11/05/2015
TRANYLCYPROMINE SULFATE 10 MG TAB	0000	1.99138	01/05/2016
TRAZODONE 100 MG TAB	0000	0.13219	11/05/2015
TRAZODONE 150 MG TAB	0000	0.27785	04/05/2016
TRAZODONE 300 MG TAB	**0000**	**3.75216**	**05/05/2016**
TRAZODONE 50 MG TAB	0000	0.06026	11/05/2015
TRETINOIN 0.01% GEL	0000	4.57788	04/05/2016
TRETINOIN 0.025% CRM	0000	3.91818	12/05/2015
TRETINOIN 0.025% GEL	0000	4.36451	12/05/2015
TRETINOIN 0.05% CRM	0000	5.64959	12/05/2015
TRETINOIN 0.1% CRM	0000	5.18533	12/05/2015
TRETINOIN MICROSPHERES 0.04 % GEL (GRAM)	0000	12.38000	02/05/2016
TRETINOIN MICROSPHERES 0.04 % GEL W/PUMP	0000	13.01928	11/05/2015
TRETINOIN MICROSPHERES 0.1 % GEL (GRAM)	0000	11.38683	04/05/2016
TRETINOIN MICROSPHERES 0.1 % GEL W/PUMP	0000	13.78020	03/05/2015
TRIAMCINOLONE 0.025% CRM	**0000**	**0.04032**	**05/05/2016**
TRIAMCINOLONE 0.025% CRM	0080	0.10220	08/05/2015
TRIAMCINOLONE 0.025% CRM	0015	0.26077	08/05/2015
TRIAMCINOLONE 0.025% LOT	0000	0.71250	09/05/2014
TRIAMCINOLONE 0.025% OINT	0080	0.12650	08/05/2015
TRIAMCINOLONE 0.025% OINT	0000	0.36420	08/05/2015
TRIAMCINOLONE 0.1% CRM	0000	0.05467	08/05/2015
TRIAMCINOLONE 0.1% LOT	0000	0.78450	08/05/2015
TRIAMCINOLONE 0.1% OINT	0000	0.08182	08/05/2015
TRIAMCINOLONE 0.1% PASTE	0000	12.90188	04/05/2016
TRIAMCINOLONE 0.5% CRM	0000	0.55621	12/05/2015
TRIAMCINOLONE 0.5% OINT	0000	0.60005	08/05/2015
TRIAMCINOLONE 55 MCG NASAL SPY	0000	5.00840	11/05/2015
TRIAMTERENE/HCTZ 37.5/25 MG CAP	0000	0.26653	09/05/2015
TRIAMTERENE/HCTZ 37.5/25 MG TAB	0000	0.19070	09/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
TRIAMTERENE/HCTZ 75/50 MG TAB	**0000**	**0.24195**	**05/05/2016**
TRIAZOLAM 0.125 MG TAB	0000	1.35750	11/05/2015
TRIAZOLAM 0.25 MG TAB	0000	1.33061	02/05/2016
TRIFLUOPERAZINE 10 MG TAB	0000	2.07436	09/05/2015
TRIFLUOPERAZINE 2 MG TAB	0000	1.21500	12/05/2014
TRIFLUOPERAZINE 5 MG TAB	0000	1.57292	09/05/2015
TRIFLURIDINE 1% EYE DROPS	**0000**	**19.83286**	**05/05/2016**
TRIHEXYPHENIDYL 2 MG TAB	0000	0.06421	08/05/2015
TRIHEXYPHENIDYL 5 MG TAB	0000	0.15263	08/05/2015
TRIMETHOBENZAMIDE 300 MG CAP	0000	1.70472	09/05/2015
TRIMETHOPRIM 100 MG TAB	0000	0.32428	08/05/2015
TROSPIUM CHLORIDE 20 MG TAB	0000	2.19863	04/05/2016
TROSPIUM CHLORIDE 60 MG CAP ER 24H	0000	6.13124	03/05/2016
URSODIOL 250 MG TAB	0000	2.02595	11/05/2015
URSODIOL 300 MG CAP	0000	6.42085	08/05/2015
URSODIOL 500 MG TAB	**0000**	**2.85470**	**05/05/2016**
VALACYCLOVIR HCL 1,000 MG TAB	**0000**	**0.80171**	**05/05/2016**
VALACYCLOVIR HCL 500 MG TAB	0000	0.51900	08/05/2015
VALGANCICLOVIR HYDROCHLORIDE 450 MG TAB	0000	55.14719	03/05/2016
VALPROIC ACID 250 MG CAP	0000	0.23160	08/05/2015
VALPROIC ACID 250 MG/5 ML SYRP	0000	0.06377	03/05/2016
VANCOMYCIN 1 GM VIAL	**0000**	**7.69146**	**05/05/2016**
VANCOMYCIN 5 GM VIAL	**0000**	**38.83019**	**05/05/2016**
VANCOMYCIN 500 MG VIAL	0000	3.85360	03/05/2015
VANCOMYCIN HCL 10 GM VIAL	**0000**	**42.17000**	**05/05/2016**
VANCOMYCIN HCL 125 MG CAP	**0000**	**9.61046**	**05/05/2016**
VANCOMYCIN HCL 250 MG CAPSULE	**0000**	**17.02850**	**05/05/2016**
VENLAFAXINE HCL 100 MG TAB	0000	0.46046	03/05/2016
VENLAFAXINE HCL 150 MG CAP ER 24H	0000	0.23223	09/05/2015
VENLAFAXINE HCL 150 MG TAB ER 24	**0000**	**3.51249**	**05/05/2016**
VENLAFAXINE HCL 25 MG TAB	0000	0.59404	02/05/2016
VENLAFAXINE HCL 37.5 MG CAP ER 24H	**0000**	**0.21842**	**05/05/2016**
VENLAFAXINE HCL 37.5 MG TAB	**0000**	**0.37094**	**05/05/2016**
VENLAFAXINE HCL 37.5 MG TAB ER 24	0000	3.83487	04/05/2016
VENLAFAXINE HCL 50 MG TAB	0000	0.46474	02/05/2016
VENLAFAXINE HCL 75 MG CAP ER 24H	0000	0.19407	08/05/2015
VENLAFAXINE HCL 75 MG TAB	0000	0.43768	12/05/2015
VENLAFAXINE HCL 75 MG TAB ER 24	0000	5.08083	04/05/2016
VERAPAMIL 120 MG CAP PELLET	0000	1.25886	09/05/2015
VERAPAMIL 120 MG TAB	0000	0.09930	01/05/2016
VERAPAMIL 120 MG TAB SA	0000	0.33675	08/05/2015
VERAPAMIL 180 MG CAP PELLET	0000	1.29904	08/05/2015
VERAPAMIL 180 MG TAB SA	0000	0.25604	08/05/2015
VERAPAMIL 240 MG CAP PELLET	0000	0.98390	11/05/2015
VERAPAMIL 240 MG TAB SA	0000	0.20711	08/05/2015
VERAPAMIL 360 MG CAP PELLET	0000	3.92819	08/05/2015
VERAPAMIL 40 MG TAB	0000	0.18591	08/05/2015
VERAPAMIL 80 MG TAB	0000	0.09653	01/05/2016
VINCRISTINE SULFATE 1 MG/ML VIAL	0000	6.13200	06/05/2015

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

Document Created May 9, 2016

GENERIC DRUG	PACKAGE SIZE	SMAC	EFFECTIVE DATE
VITAFOL FE+ DOCUSATE COMBO PCK	0000	0.14000	04/05/2016
VITAMIN D 50,000 UNITS SOFTGEL	0000	0.31540	07/30/2015
VORICONAZOLE 200 MG TAB	**0000**	**18.55145**	**05/05/2016**
WARFARIN SODIUM 1 MG TAB	0000	0.26664	08/05/2015
WARFARIN SODIUM 10 MG TAB	0000	0.25645	08/05/2015
WARFARIN SODIUM 2 MG TAB	0000	0.26270	08/05/2015
WARFARIN SODIUM 2.5 MG TAB	0000	0.24051	09/05/2015
WARFARIN SODIUM 3 MG TAB	0000	0.29546	08/05/2015
WARFARIN SODIUM 4 MG TAB	0000	0.28063	09/05/2015
WARFARIN SODIUM 5 MG TAB	0000	0.21600	08/05/2015
WARFARIN SODIUM 6 MG TAB	**0000**	**0.30978**	**05/05/2016**
WARFARIN SODIUM 7.5 MG TAB	0000	0.31146	01/05/2016
WATER FOR INJECTION VIAL	0000	0.05819	11/05/2015
ZAFIRLUKAST 10 MG TAB	0000	1.62626	11/05/2015
ZAFIRLUKAST 20 MG TAB	0000	1.76989	11/05/2015
ZALEPLON 10 MG CAP	0000	0.53719	09/05/2015
ZALEPLON 5 MG CAP	0000	0.45180	08/05/2015
ZIDOVUDINE 100 MG CAP	0000	1.11600	12/05/2014
ZIDOVUDINE 300 MG TAB	0000	0.45090	09/05/2015
ZIPRASIDONE HCL 20 MG CAP	0000	1.09195	09/05/2015
ZIPRASIDONE HCL 40 MG CAP	0000	1.02998	09/05/2015
ZIPRASIDONE HCL 60 MG CAP	0000	1.23132	08/05/2015
ZIPRASIDONE HCL 80 MG CAP	0000	1.23132	08/05/2015
ZOLMITRIPTAN 2.5 MG TAB	0000	8.13439	04/05/2016
ZOLMITRIPTAN 5 MG TAB	0000	11.30410	11/05/2015
ZOLMITRIPTAN 5 MG TAB RAPDIS	**0000**	**13.10143**	**05/05/2016**
ZOLPIDEM TART ER 12.5 MG TAB	0000	1.65216	11/05/2015
ZOLPIDEM TARTRATE 10 MG TAB	**0000**	**0.03799**	**05/05/2016**
ZOLPIDEM TARTRATE 5 MG TAB	**0000**	**0.03945**	**05/05/2016**
ZOLPIDEM TARTRATE 6.25 MG ER TAB	0000	2.40565	01/05/2016
ZONISAMIDE 100 MG CAP	0000	0.16050	08/05/2015
ZONISAMIDE 25 MG CAP	0000	0.22050	08/05/2015
ZONISAMIDE 50 MG CAP	0000	0.25350	08/05/2015

Recent changes in bold text