Medicaid Covered Outpatient Prescription Drug Reimbursement Information by State

Quarter Ending September 2026

View cost sharing and copayment information

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Alabama	Ingredient cost is the lower of: • Alabama average acquisition cost (AAC), or if not available, wholesaler acquisition cost (WAC) -4% for brand drugs and WAC +0% for generic drugs • FUL • U&C • Average sale price (ASP) plus 6% (blood clotting factors)	Professional dispensing fee is $10.64	No
Alaska	Ingredient cost for in-state pharmacies is the lowest of: • Amount billed * • WAC plus 1% • State maximum allowable cost (SMAC) = NADAC • Federal upper limit (FUL). Ingredient cost for out-of-state pharmacies is the lowest of: • Amount billed * • WAC minus 2% • State maximum allowable cost (SMAC) = NADAC • Federal upper limit (FUL). * When considering the amount billed by the provider, the lowest of the following will be the amount billed: gross amount due, usual and customary pricing, and submitted ingredient cost.	Professional dispensing fee is: • On the Road, Non-Tribal Pharmacy- $11.80 • Off the Road, Non-Tribal Pharmacy - $22.17 • Tribal Health Pharmacy- $26.81 • For an out-state pharmacy- $10.76 • For a mediset pharmacy- $16.58	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Arizona	Ingredient cost is: • U&C • The AHCCCS Maximum Allowable Cost (MAC) • NADAC • Contracted rates between AHCCCS and the FFS Pharmacy Benefit Manager	Professional dispensing fee is: • $10.11 for CMS Covered Outpatient Drugs including specialty medications; • $15.34 for compounded prescriptions	Yes
Arkansas	Ingredient cost is lower of: • NADAC; or • state AAC; or • FUL	Professional dispensing fee is: • $9.00 for brand and non-preferred brands; • $10.50 for preferred brand and generics	No
California	Ingredient cost is: The “drug’s ingredient cost” means the lowest of: • NADAC; • or when no NADAC is available, the WAC plus 0%; or • FUL; or • The Maximum Allowable Ingredient Cost (MAIC).	Professional dispensing fee is: • $13.20 for claims less than 90,000 • $10.05 for claims 90,000 or more	Yes

Colorado	Ingredient cost for all drugs for retail pharmacies, rural, mail order, specialty, government, institutional and long term care pharmacies shall be based upon the lower of: • The U&C charge to the public or • The allowed ingredient cost. The allowed ingredient cost is the lesser of AAC, NACAC, or submitted ingredient cost. If AAC and NADAC are not available the allowed ingredient cost is the lesser of MAC or the submitted drug ingredient cost. Physician-administered drugs (PAD) are reimbursed at ASP - 3.3%, excepting injectable opioid antagonists, which are reimbursed at ASP +2.2%. PADs without ASP are reimbursed at WAC.	The professional dispensing fees for all pharmacies except government and rural pharmacies shall be tiered based upon annual total prescription volume. The dispensing fees shall be tiered at: • Less than 60,000 total prescriptions filled per year = $13.40 • Between 60,000 and 90,000 total prescriptions filled per year = $11.49 • Between 90,000 and 110,000 total prescriptions filled per year = $10.25 • Greater than 110,000 total prescriptions filled per year = $9.31 The determination of total prescription volume shall be completed by surveying pharmacies on an annual basis. Pharmacies failing to respond to the survey shall be reimbursed the $9.31 professional dispensing fee. The tiered professional dispensing fee shall not apply to government pharmacies which shall instead be reimbursed a $0.00	No

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
		professional dispensing fee. The tiered professional dispensing fee shall not apply to rural pharmacies, which shall instead be reimbursed a $14.14 professional dispensing fee. The enhanced professional dispensing fee for clotting factor drugs shall be $0.03 per unit The enhanced professional dispensing fee for parenteral nutrition products shall be $73.21.	
Connecticut	Ingredient cost is lowest of: The usual and customary • NADAC • FUL or • (WAC) plus zero (0) percent • PAD is 100% of the Medicare Average Sale Price (ASP)	Professional dispensing fee is $10.75	NO
Delaware	All prescribed drugs will reimburse:: • NADAC. If no NADAC, • Delaware Average Drug Allowable Cost (DMAC). If no NADAC or DMAC, • WAC plus 2% for legend and WAC minus 2% for non-legend drugs. If no NADAC, DMAC, WAC, • The U&C PADs will reimburse using the Medicare Fee Schedule	Professional dispensing fee is $10.00	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
District of Columbia	Ingredient cost is: • Brand Name Drugs: the lesser of the pharmacies' U&C, AAC, or WAC. • Multiple Source Drugs: the lesser of FUL, NADAC, WAC, the pharmacy's U&C, or the District Maximum Allowable Cost (DMAC). • 340B purchased drugs, Federal Supply Schedule (FSS), nominal price: AAC	Professional dispensing fee is $11.15	Yes
Florida	Ingredient cost is lower of: • NADAC, • WAC plus 0% • SMAC, • provider's U&C High Cost Drugs: Florida Medicaid reimburses for high-cost drugs, as listed on the state's website, exempt from the DRG and EAPG bundled payment at the wholesaler or provider AAC.	Professional dispensing fee is $10.24	Yes
Georgia	Reimbursement for legend and non-legend drugs shall not exceed the lowest of: • The Georgia Maximum Allowable Cost (GMAC), • The Georgia Estimated Actual Acquisition Cost (GEAC), • FUL, • The usual and customary charge or the submitted ingredient cost The Select Specialty Pharmacy Rate (SSPR)	Professional Dispensing fee is $10.63 for pharmacies with the following exception; the professional dispensing fee shall be $11.50 for Independent Pharmacies with a prescription claim volume of < 65,000 per year	Yes
Guam	The MAC is based on AWP plus a dispensing fee. If the pharmacis has drugs with an ingredient price less than thew MAC, the pharmacist is required to charge Medicaid the lower price If the AWP Medicaid will utilize the pharmacist's acquisition cost unless the drug is subject to a Federal Upper Limit (FUL), in which case Medicaid must use the FUL rate set by CMS under the authority of the Secretary of HHS.	Professional Dispensing fee is $4.40	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Hawaii	For single source drugs: • Submitted ingredient cost • Provider's U&C • WAC • NADAC For multiple source drugs: • Submitted ingredient cost • Provider's U&C • WAC • FUL • SMAC • NADAC	Professional Dispensing fee is $10.76 per prescription	Yes
Idaho	Ingredient cost is: • AAC, or where there is no AAC reimbursement is WAC	Professional dispensing fees: • Less than 39,999 claims a year = $15.11 • Between 40,000 and 69,999 claims per year = $12.35 • 70,000 or more claims per year = $11.51	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Illinois	Ingredient cost is lower of: The pharmacy's usual and customary charge to the general public. Single source drugs: the lower of: • National Average Drug Acquisition Cost, if available • Wholesale acquisition cost of national drug code on claim minus 4.4% • The State upper limit Multiple source drugs: the lower of: • National Average Drug Acquisition Cost, if available • Wholesale acquisition cost of national drug code on claim minus 17.5% • The federal upper limit • The State upper limit	Professional dispensing fees: • Critical Access Pharmacies PDF is $15.55 for both single source and multiple source drugs • For all other pharmacies, PDF is $8.85 for both single source and multiple source drugs • Illinois based hemophilia treatment centers for 340B purchased antihemophilic products, PDF is $207.	Yes
Indiana	Ingredient cost is lower of: • NADAC; • State MAC; • The FUL; or • WAC	Professional dispensing fee is $10.48	Yes
Iowa	Ingredient cost is: • AAC as determined from surveys or where there is no AAC reimbursement is WAC	Professional dispensing fee is $10.38	No

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Kansas	Ingredient cost is the lower of: • NADAC, • WAC, • FUL, • SMAC, • Submitted Ingredient Cost, or • The U&C DAW Payment for Dispense as Written 1 (DAW1) –will be reimbursed the drug ingredient cost plus a professional dispensing fee of $10.50. The drug ingredient cost reimbursement shall be the lowest of: • The National Average Drug Acquisition Cost (NADAC) of the drug; or • Wholesale Acquisition Cost (WAC) + 0%; or • The provider's usual and customary (U & C) charge to the public, as identified by the claim charge. No dispensing fee given; or • d) Pharmacy submitted ingredient cost. Physician Administered Drugs (PADS) submitted under the medical benefit, including those drugs purchased through the 340B program, will be reimbursed at Medicare Part B fee schedule rates. If a Medicare Part B fee schedule rate is not on file, its reimbursement basis will be WAC + 0%.	Professional dispensing fee is $10.50	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Kentucky	Ingredient cost for: Legend, non-legend, specialty drugs, and long-term care is the lower of: • NADAC, • WAC plus 0%, • The FUL, • The State MAC, or • U&C). Physician Administered Drugs: • Drugs administered by a physician or in a hemophilia treatment center submitted under the medical benefit will include rates as noted on the Medicare fee schedule or the amount determined by the lowest of logic in Section A. I., and no professional dispensing fee shall be paid. Covered entities using drugs purchased under the 340B Program for Medicaid members must bill no more than their actual acquisition cost. 340B purchased drugs, FSS, nominal price: • AAC	Professional dispensing fee is $10.64 A. For nursing facility residents, meeting Medicaid patient status, an repackaging of two (2) cents per unit dose, but not to exceed $25.00 per claim, shall be paid for repackaging a non-unit dose drug in unit dose form. **B.** Compounded drugs, prescribed by an authorized provider shall reimburse the actual acquisition cost for legend drugs determined by the lowest of logic in Section A.I. and, in all instances, the professional dispensing fee shall be $10.64 every 13 days per compounded drug per individual member per unique pharmacy NPI.	Yes
Louisiana	Ingredient cost for brand is the lower of: • NADAC, • WAC, or • U&C Ingredient cost for generics is the lower of: • NADAC, • WAC, • FUL, or • U&C Clotting Factor • Louisiana clotting factor AAC	Professional dispensing fee is: • $11.81 • clotting factor PDF is $0.03500 per unit dispensed, up to a maximum amount of $1,676.22.	No

Maine	Ingredient cost is lower of: **Generic Drugs –** • NADAC, • FUL, • WAC, • The State MAC, • The Submitted Ingredient Cost dispensing fee, • U&C, • GAD, or • AWP – 16.67% **Brand-name Drugs** - • NADAC, • WAC, • The State MAC, • The Submitted Ingredient Cost dispensing fee, • U&C, • GAD, or • AWP – 16% **Specialty Pharmacy Providers -** • NADAC, • FUL, • WAC, • The State MAC, • The Submitted Ingredient Cost dispensing fee, • U&C, • GAD, or • AWP – 16.67%	Professional dispensing fee is $11.89	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
	Reimbursement for Physician Administered Drugs MaineCare determines drug fee schedules for these drugs as set by Medicare Part B for Maine area "99." MaineCare will reimburse the lower of: (a) The fee schedule rate (when the ASP is available), or (b) The provider's acquisition cost only, excluding shipping and handling. Selective Carve Out Drugs: Effective for dates of service on or after July 1, 2025, selected drugs as listed on the State's website (or provider manual) administered during an inpatient stay shall be reimbursed outside of the per diem rate for the inpatient stay. Claims for these selected drugs shall be reimbursed at actual acquisition cost (AAC). The AAC is the hospital's invoice price for the drug, ***net of all*** on or off invoice reductions, discounts, rebates, charge backs and similar adjustments that the hospital has, or will, receive from the drug manufacturer or other party for the drug, including any efficacy, outcome, or performance based guarantees (or similar arrangements), whether received prepayment or post payment.		

Maryland	Ingredient cost is lower of: • NADAC, • WAC plus 0%, • FUL, • State AAC, • U&C	Professional dispensing fee is: • $10.67 for covered outpatient legend and non-legend drugs dispensed by a retail community pharmacy; specialty drugs not dispensed by a retail community pharmacy but dispensed primarily through the mail; for clotting factor drugs from specialty pharmacies, hemophilia treatment centers (HTC) and Centers of Excellence; Drugs purchased through the Federal Supply Schedule (FSS); Drugs purchased at Nominal Price (outside of 340B or FSS). • $11.67 for drugs not dispensed by a retail community pharmacy (i.e., institutional or long-term care facility pharmacies) • $12.12 for 340B covered	NO

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		entities and Federally Qualified Health Centers (FQHCs)	
Massachusetts	Ingredient cost is lowest of: • FUL • WAC • NADAC • U&C 340B drugs is the AAC of the drug Non - 340B Clotting factor is lowest of: • NADAC • WAC • ASP + 6% • U&C 340B Clotting Factor is Ceiling Price	Professional Dispensing fee is: • $10.02 • $10.02 for non-340B Clotting Factor • $10.02 plus 2.75 cents per unit for 340B Clotting Factor	No
Michigan	Ingredient cost is: • NADAC • WAC • MAC • U&C	Professional dispensing fee is: • $20.02 for specialty drugs • $10.80 for drugs preferred on PDL • $10.64 for drugs not on PDL • $9.00 for drugs on PDL but non-preferred	Yes

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Minnesota	Ingredient cost is the lower of: • NADAC • the State MAC • U&C For drugs for which NADAC is not reported and the maximum allowable cost is not calculated: • WAC -2% The ingredient cost is adjusted to account for the Minnesota Wholesale Drug Tax.	Professional dispensing fee is $10.77 The professional dispensing fee for prescribed over-the-counter drugs that are not "covered outpatient drugs" is $3.65. The dispensing fee is prorated based on the percent of the package dispensed when the pharmacy dispenses a quantity less than the manufacturer's package size.	Yes
Mississippi	Ingredient cost is lesser of: • NADAC, or • WAC plus 0% no NADAC is available, or • A rate set by the Division of Medicaid's rate-setting vendor when no NADAC or WAC are available, or • The provider's usual and customary charge. • PAD - CADDs reimbursed the lesser of the National Average Drug Acquisition Cost (NADAC), the Wholesale Acquisition Cost (WAC) + 0% or the providers' usual and customary charges to the general public	Professional dispensing fee is $11.29 Professional dispensing fee for specialty drugs not dispensed by a retail community pharmacy and dispensed primarily through the mail is $61.14.	No

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Missouri	Ingredient cost is: • NADAC; if no NADAC, • State MAC; if no NADAC or MAC, • WAC minus 0%; • The usual and customary charge submitted by the provider, if it is lower.	Professional dispensing fee is: • Out-of-state pharmacy providers receive a professional dispensing fee of $8.85. • In-state pharmacy providers receive a professional dispensing fee of $12.22, plus an adjustment to account for the costs of the Missouri Pharmacy Reimbursement Allowance attributable to Medicaid-reimbursed prescriptions. • Long-term care pharmacy providers receive an additional $0.50 professional dispensing fee.	Yes

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Montana	Ingredient cost is lower of: • AAC, • Submitted Ingredient Cost, • WAC, or • FUL a. The physician administered drug fee schedule is updated effective the 1st day of each quarter as determined by: 1. The Medicare Average Sales Price (ASP) methodology if there is an ASP fee; or 2. The logic outlined in Subsection A, with the exception of the professional dispensing fee. No professional dispensing fee will be paid for physician administered drugs.	Professional dispensing fee is: • $12.83 for pharmacies with annual prescription volume > 70,000 • $15.17 for pharmacies with annual prescri ption volume 40,000 – 69,999 • $17.52 for pharmacies with annual prescription volume 0 – 39,999	No
Nebraska	Ingredient cost is the lower of: • NADAC, • FUL, • MAC, or • U&C. If NADAC pricing is not available: • WAC plus 0% will be included in the lower of logic (legend, non-legend, specialty drugs, long- term care); • ASP plus 6% and when ASP is unavailable, WAC plus 6.8% or manual pricing at actual acquisition cost (physician administered drugs); • AAC (340B purchased drugs, FSS, nominal price); the lesser of NADAC, WAC plus 0%, ASP plus 6%, FUL (clotting factor).	Professional dispensing fee is $10.02	Yes

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Nevada	Ingredient cost is the lower of: • NADAC, • FUL, • SMAC, or • U&C • Physician Administerd Drugs Payment for Physician Administered Drugs (PADs) is limited to the lesser of the Nevada Medicaid PAD fee schedule, Medicare Part B fee schedule, NADAC, WAC, or AAC. a. No dispensing fee is paid for a PAD. b. For 340B PADs, the ingredient cost reimbursement will be the lowest of (a) AAC or (b) 340B ceiling price.	Professional Dispensing Fee is $10.17	Yes
New Hampshire	Ingredient cost is lower of: • NADAC • WAC +0% • SMAC • FUL • U&C	Professional dispensing fee is: • $10.47	Yes
New Jersey	Ingredient cost is: • NADAC, • WAC minus 2%, • SWP minus 19%, Ingredient cost for PAD shall be the lowest of: • a drug or Long-Acting Reversible Contraceptive (LARC) Wholesale Acquisition Cost (WAC) less a discount of one (1) percent, • FUL • SUL • the actual drug acquisition cost, as billed in the submitted charge field (in the case of a drug dispensed from 340B inventory, this will be the 340B acquisition price).	Professional dispensing fee is: • $10.92	No

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
New Mexico	Ingredient cost is lower of: • FUL • NADAC • WAC Ingredient Cost • U & C	Professional Dispensing fee is $10.30	No
New York	Ingredient cost is: • NADAC • WAC • WAC less 17.5% (generic) • FUL • SMAC • U&C	Professional Dispensing fee is $10.18	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
North Carolina	Ingredient cost is the lower of: • NADAC, • MAC, • U&C,or • GAD If NADAC pricing is not available: • WAC plus 0% will be included in the lower of logic (legend, non-legend, specialty drugs, long- term care); • ASP plus 6% or if ASP is unavailable, AWP minus 10% (physician administered drugs); • WAC plus 6% (physician administered contraceptive drugs); • AAC (340B purchased drugs, FSS, nominal price); • The lower of NADAC, MAC or U&C (clotting factor) New physician administered drugs are reimbursed at the Average Sales Price (ASP) to follow Medicare pricing. If there is no ASP value available from Medicare, fees shall be established based on the lower of vendor specific National Drug Code (NDC) Average Wholesale Price (AWP) less ten percent (10%) pricing as determined using lowest generic product NDC, lowest brand product NDC or a reasonable value compared to other physician drugs currently on North Carolina's physician drug program list.	Professional dispensing fee: • $10.24	Yes

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North Dakota	Ingredient cost for legend, non-legend, specialty drugs, long-term care, physician administered drugs, clotting factor is the lower of: • NADAC, • WAC, • MAC, • U&C The lower of logic also includes: • AAC (340B, 340B physician administered drugs, FSS, Nominal Price); • 340B contract pharmacies not covered; • Invoice pricing (investigational drugs). • For PADs, reimbursement will be the lesser of the Medicare Fee Schedule and all of the logic as outlined above.	Professional dispensing fee is $12.46; plus $0.15 per pill (pill splitting)	Yes

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Ohio	Ingredient cost is lower of: • NADAC PDF or; • U&C If NADAC is not available, AAC is the lesser of: • WAC (WAC plus 0%); • SMAC; • Provider's U&C • Drugs purchased by 340B covered entities through the federal 340B program will be paid at ingredient cost 340B AAC • Drugs purchased by 340B CE's outside of the federal 340B program = AAC FSS – paid at AAC NP- paid at AAC Specialty drugs – AAC Clotting Factor will be the lesser of: • Payment limit shown in Medicare Part B pricing file, minus the furnishing fee • Provider's U&C Provider Administered Drugs (other than VCF vaccines) : • SMAC • Payment limit shown in the current Medicare Part B drug pricing file; • 107% of WAC • 85.6% of AWP	Professional dispensing fee is tiered: Less than 49,999 prescriptions per year = $15.47 Between than 50,000 and 74,999 prescriptions per year = $11.40; Between than 75,000 and 99,999 prescriptions per year = $9.51; 100,000 or more prescriptions per year = $8.30	Yes
Oklahoma	The ingredient cost for Brand Name Drugs is the lower of: • NADAC; or • WAC The ingredient cost for Generic Drugs is the lower of: • State MAC, • NADAC, or • WAC	Professional dispensing fee is $10.87	Yes

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Oregon	Ingredient cost is the lower of: • Oregon-specific AAC file, • NADAC, • WAC plus 0%, or • U&C Physicain Administered Drug (PAD) reimbursement is based on 100% of the Medicare fee schedule. When no Medicare fee is listed the rate shall be based upon the WholesaleAcquisition Cost (WAC). If no WAC is available, then the rate shall be reimbursed at AcquisitionCost. 340B covered entities that bill for PAD and carve in for Medicaid, shall not exceed the entity's actual acquisition cost. High Cost Drugs: Selected high-cost drugs as listed in the state's provider manual are excluded from the Inpatient hospital DRG Reimbursement System. Reimbursement will be based upon the Actual Acquisition Cost as outlined on the Outpatient Hospital Services pages of Oregons state plan amendment.	Professional Dispensing Fee varies by claims volume; • less than 40,000 claims a year is $16.87; • between 40,000 and 79,999 claims per year is $11.93; • 80,000 or more claims per year is $9.99 • 340B dispensing fee regardless of volume $20.86	No
Pennsylvania	Ingredient cost for brand drugs is the lower of: • Provider's U&C to the general public, • NADAC or • In the absence of a NADAC, Wholesale Acquisition Cost (WAC) minus 3.3% Ingredient cost for generic is the lower of: • Provider's U&C to the general public, • NADAC or • In the absence of a NADAC, WAC minus 50.5% • FUL • State MAC	Professional Dispensing fee is: • $10.00	Yes
Puerto Rico	Ingredient cost is the lowest of: • AAC, defined as NADAC, • State-established MAC, or • Provider's U&C to the general public	Professional Dispensing fee is: • $8.96	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Rhode Island	Ingredient cost is the lower of: • NADAC, • WAC plus 0%, • FUL, • SMAC, • FDB SWD minus 19%, or • U&C	Professional Dispensing Fee is: • $8.96; • $7.90 (Beneficiaries residing in a long-term care facility)	Yes
South Carolina	Ingredient cost is lower of: • NADAC, • If a NADAC does not exist, WAC minus 0%, • SMAC, or • U&C	Professional Dispensing fee is $10.50	Yes
South Dakota	Ingredient cost is: • U&C, • SMAC, • NADAC, or • WAC For prescription drugs purchased through the 340B program and provided by a covered entity, payment shall be limited to the provider's net actual acquisition cost for purchasing the medication after any rebates received plus a professional dispensing fee of $10.50. For physician-administered drugs purchased through the 340B program and provided by a covered entity in an outpatient setting, payment shall be limited to the provider's net actual acquisition cost for purchasing the medication after any rebates received. Professional dispensing fee is not reimbursed for these drugs.	Professional Dispensing fee is $10.50	Yes

Tennessee	Ingredient cost is: • FUL; or • AAAC, if there is no FUL or if the AAAC is lower than the FUL, or • NADAC, if there is no AAAC or if the NADAC is lower than the AAAC; or • WAC minus three percent for brand-name drugs or WAC minus six percent for generic drugs, if there is no AAAC or NADAC; or • U&C	Professional Dispensing Fee (PDF) • Ambulatory pharmacies: PDF is tiered based on annual Rx volume. ○ $13.16 for pharmacies with a Rx volume of less than 65,000 claims per year; ○ $9.02 for pharmacies with a Rx volume of 65,000 or more claims per year. ○ $13.16 for pharmacies that opened within one year of the State's cost-of-dispensing survey. • 340B: ○ Claims submitted as 340B claims, PDF $16.92. ○ Claims submitted as non-340B claims, PDF $13.16. • Long-term care PDF: $13.16 • Specialty pharmacies: ○ For non-specialty drugs dispensed by in-state specialty pharmacies, PDF, $13.16. ○ PDF for specialty drugs (regardless of which type of pharmacy dispenses), $52.46. • Blood Clotting Factors PDF, $172.69 • Out-of-State Pharmacies: ○ Rx volume less than 65,000 claims/year and located in border areas closer to TennCare members than Tennessee pharmacies, PDF for drugs other than specialty drugs/blood clotting factor, $13.16. ○ All other out-of-state pharmacies serving TennCare members (including out-of-state specialty pharmacies), PDF for drugs other than specialty drugs/ blood clotting factors, $9.02. ○ PDF for specialty drugs dispensed, $52.46. ○ PDF for blood clotting factors and other	NO

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
		blood products dispensed, $172.69. • Pharmacies that Fail to Respond to a Mandatory Pharmacy Reimbursement Survey: ○ Failure to provide a useable response to three mandatory surveys, PDF $5.00. ○ A pharmacy that receives a lower dispensing fee because of failure to provide a useable response to a mandatory survey may resume receiving its usual dispensing fee by submitting a useable response to the next mandatory survey. • Reimbursement for compounded Rxs: ○ Level 1 (0-15 min) – PDF $13.16 for pharmacies with a Rx volume of less than 65,000 claims/year, and PDF $10.00 for pharmacies with a Rx volume of 65,000 or more claims/year ○ Level 2 (16-30 min) – PDF $15.00 Level 3 (31 or more min) – PDF $25.00	

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Texas	Ingredient costs of legend and nonlegend drugs: • Retail = NADAC • Long term care (LTC) = (NADAC minus 2.4%) • Specialty = (NADAC minus 1.7%) If NADAC is not available for a specific drug: • Retail = (WAC minus 2%) • LTC = (WAC minus 3.4%) • Specialty = (WAC minus 8%) • 340B is based on state's estimate of the 340 ceiling price	Professional Dispensing fee is: • ((Acquisition Cost + Fixed Component) divided by (1 – the percentage used to calculate the Variable Component)) - Acquisition Cost) + Delivery Incentive + Preferred Generic Incentive	No

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Utah	Ingredient cost is the lesser of: • Wholesale Acquisition Cost (WAC), • FUL, • Utah Maximum Allowable Cost National Average Drug Acquisition Cost (NADAC), or • Submitted Ingredient Cost **Provider-Administered Drugs** Covered provider-administered drugs will be reimbursed according to the Average Sales Price (ASP) Drug Pricing File, published quarterly by the Centers for Medicare and Medicaid Services (CMS), for drugs that have an ASP price set by CMS. Covered provider-administered drugs for which CMS does not publish an ASP price will be reimbursed in accordance with the Utah Medicaid fee schedule published on Utah's Medicaid Coverage and Reimbursement Code Look-up Tool. Carve out For the purpose of this section, Ultra High-Cost Drugs are defined as any drug with an actual acquisition cost greater than or equal to $1,000,000 per dose. The actual acquisition cost must be net of any discounts the provider may receive to offset its acquisition cost (i.e., rebates to the provider, negotiated discounts, etc.). Beginning SFY 2024, Ultra High-Cost Drugs are reimbursed via a separate, unbundled, payment for the actual acquisition cost of the drug. This payment supersedes other reimbursement methodologies within this attachment. Charges for Ultra High-Cost Drugs should not be included in any claims submitted through normal adjudication processes.	The Utah Medicaid professional dispensing fees are as follows: 1. $11.57 for prescriptions except hemophilia clotting factor; and • 2. $97.53 for hemophilia clotting factor. • No PDF for PADs	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Vermont	Ingredient cost will be reimbursed the lowest of: • NADAC + PDF; ; • WAC + 0% + PDF; ; • SMAC + PDF; • FUL + PDF; • AWP-19% + PDF; • Submitted Ingredient Cost + Submitted dispensing fee; • Provider's U&C charges; or • Gross Amount Due	Professional Dispensing fee is: • for a retail community pharmacy, institutional or long term care pharmacy is $11.13. • for specialty drugs including but not limited to biologics and limited distribution drugs is $17.03.	Yes
Virginia	Ingredient cost for legend, non-legend, specialty drugs, long-term care is the lower of: • NADAC, • WAC, • FUL, or • U&C Ingredient cost for other drugs: • Lower of NADAC, WAC, U&C (clotting factor); • AAC (340B, 340B physician administered drugs, FSS, Nominal Price); • ASP plus 6% (physician administered drugs)	Professional dispensing fee is $10.65	No

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Washington	Ingredient cost for covered outpatient drug does not exceed the lesser of AAC, plus a professional dispensing fee or the provider's usual and customary charge. The AAC is calculated as the lowest of: • NADAC, • MAC, • FUL, • U&C, • Submitted ingredient cost. Where NADAC does not exist,Wholesale Acquisition Cost (WAC) is used as the basis for the reimbursement.	Professional dispensing fee is: • High-volume pharmacies (70,000 or more Rxs/yr) $ 9.80 • Mid-volume pharmacies (30,000 – 69,999 Rxs/yr) $11.91 • Low volume pharmacies (less than 30,000Rxs/yr) $14.30 • Unit Dose Systems $14.30/Rx	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
West Virginia	Ingredient cost is the lower of: • NADAC; • If no NADAC, then WAC+0% ; • FU ; • SMAC; • Submitted ingredient cos; • Provider's U&C 340B Purchased drugs: Drugs purchased by CE's reimbursed lower of AAC plus the PDF Drugs purchased outside of 340B program by CEs will be reimbursed lower of: • NADAC; • No NADAC, then WAC plus 0%; • FUL; • SMAC • Submitted ingredient cost; • Provider's U&C FSS: AAC NP: AAC Specialty drugs & drugs not dispensed by a retail community pharmacy will be reimbursed the lower of: • NADAC; • No NADAC, then WAC plus 0%; • FUL; • SMAC • Submitted ingredient cost; • Provider's U&C Clotting Factor is reimbursed at WAC plus 0%.	Professional Dispensing fee is: • $10.49	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Wisconsin	Ingredient cost is lower of: • NADAC • U&C • If NADAC is not available, • WAC • SMAC • Provider's U&C; • 340B covered entity (including I/T/U) pharmacies will receive AAC ingredient cost (not to exceed the 340B ceiling price) plus PDF • Drugs purchased outside of 340B program by CE's = AAC • Specialty drugs based on State SMAC Lower of SMAC or Provider's U&C • FSS - reimbursed ingredient cost (AAC) • NP - reimbursed ingredient cost (AAC) **Physician Administered Drugs (PAD)** – Drug ingredient costs are reimbursed at the Medicare Fee Schedule. If there is no ASP, then the drug ingredient costs are reimbursed at NADAC. If there is no ASP or NADAC, then drug ingredient costs are WAC +0%. No professional dispensing fee is reimbursed.	Professional Dispensing fee is based on annual prescription volume: • Less than 34,999 prescriptions per year $15.69; • $35,000 or more prescriptions per year is $ 10.51; • Non-tribal FQHC $24.92 • $0.015 per unit (for repackaging); • $7.79 (compound drug fee); • $9.45 to $40.11 (pharmaceutical care dispensing fee)	Yes

State	Ingredient Cost	Professional Dispensing Fee	State Maximum Allowance Cost (MAC)
Wyoming	Ingredient cost for legend, non-legend, specialty drugs, long term care pharmacies, and clotting factor is the lower of: • NADAC; • No NADAC WAC plus 0% • FUL; • SMAC; • Ingredient Cost submitted; • GAD; • Provider's U&C (Reimbursement for claims that pay GAD or U&C do not include the $10.65 PDF). 340B purchased products shall bill no more than AAC. Drugs purchased outside of 340B program and dispensed by 340B contact pharmacies are not covered. FSS = No more than the AAC for the cost of the drug. Nominal Price = No more than AAC for the drug. PADs submitted under the medical benefit will be reimbursed 100% of ASP. PADs without an ASP will be reimbursed at WAC plus 0%.	Professional Dispensing fee is $10.65	Yes