

State Supported Brand Medications- Updated 9/9/2024

After a brand name drug's patent has expired there may be a company producing a generic drug that meets the FDA's criteria for the "181-day generic drug exclusivity", which means it is protected from competition from other generic versions of the same drug product for approximately 181 days. After the expiration of the 181-day exclusivity period, other generic companies may be poised to enter the market and as more generic drugs are available, the price begins to fall.

The state Medicaid pharmacy program staff will monitor these high-cost brand-name drugs and check the Federal rebate file to determine the most economical choice for the state, either:

- The brand name drug due to a higher Federal rebate and lower final net cost to the state or
- The generic drug that likely has the 181-day generic exclusivity without other generic competition

When there is sufficient supply of the generic drugs and the price of the generics has fallen to less than the final net cost of the brand name drug, the generic may be the most cost-effective choice for the state. At that time, the Medicaid staff may place a State Maximum Allowable Cost (MAC) on both the brand and the generic drugs for that specific drug/strength/dosage form. Until that occurs, Arkansas Medicaid will require the Brand drug to continue to be dispensed by pharmacies. Please note clinical criteria and claim edits will still apply. Pharmacies will receive a 30-day notice prior to Arkansas Medicaid applying a MAC on the brand and generic drugs related to State Supported Brand Medications.

Below is the list of State Supported Brand Medications with an estimated time for a review to determine appropriateness of the addition of a MAC:

| <b>Drug</b>                    | <b>Estimated Date for MAC review</b> |
|--------------------------------|--------------------------------------|
| Afinitor Disperz tablets       | 1/1/2025                             |
| Apriso capsules                | 1/1/2025                             |
| Carospir suspension            | 1/1/2025                             |
| Condylox gel                   | 1/1/2025                             |
| Emflaza tablets and suspension | 1/1/2025                             |
| Keveyis tablets                | 1/1/2025                             |
| Korlym tablets                 | 1/1/2025                             |
| Nexavar tablets                | 1/1/2025                             |
| Pentasa capsules               | 1/1/2025                             |
| Pylera capsules                | 1/1/2025                             |
| Rectiv ointment                | 1/1/2025                             |
| Revlimid capsules              | 1/1/2025                             |
| Sprycel tablets                | 1/1/2025                             |
| Sutent tablets                 | 1/1/2025                             |
| Taclonex Suspension            | 1/1/2025                             |
| Votrient tablets               | 1/1/2025                             |