

**WAC 182-530-7300 Reimbursement—Requesting a change.** Upon request from a provider, the medicaid agency may reimburse at the provider's actual acquisition cost (AAC) for a drug that would otherwise be reimbursed at maximum allowable cost (MAC) when:

(1) The availability of lower cost equivalents in the marketplace is severely curtailed and the price disparity between AAC for the drug and the MAC reimbursement affects clients' access; and

(2) An invoice documenting AAC relevant to the date the drug was dispensed is provided to the agency.

[Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 24-08-061, § 182-530-7300, filed 3/29/24, effective 5/1/24; WSR 17-07-001, § 182-530-7300, filed 3/1/17, effective 4/1/17; WSR 16-01-046, § 182-530-7300, filed 12/9/15, effective 1/9/16. WSR 11-14-075, recodified as § 182-530-7300, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.04.050, 74.08.090, 74.09.530, and 74.09.700. WSR 07-20-049, § 388-530-7300, filed 9/26/07, effective 11/1/07.]