



West Virginia Offices of the Insurance Commissioner

West Virginia NADAC Quarterly Report Template																					
PBM Name: Independent Health's P																					
SBS Number: 523560412																					
Product NDC Number (complete 11 digit number)	Product Name (the complete NDC Description)	Fill Date	Quantity of the Drug Dispensed (expressed in metric decimal units)	Pharmacy Name	Pharmacy Provider ID	Amount the Pharmacy was Reimbursed by the PBM (per Unit or Dosage)	Amount of Pharmacy Fees	Total Amount of Dispensing Fee Paid	Total Amount of Dispensing Fee Paid by PBM	Total Amount of Dispensing Fee Paid by Member	Total Amount of Member Cost Share	Average NADAC (from CMS survey report as provided by the OIC)	Average NADAC Report Date (date of the CMS Report used to determine the "Average NADAC" rate)	Below 10% Actual Percentage of NADAC Reimbursement	10% and Above Actual Percentage of NADAC Reimbursement	Affiliate Pharmacy (Yes / No)	Dispensed Pursuant to Federal, State or Local Government Health Plan (Yes / No)	INS TEST NADAC plus \$10.49	INS TEST Actually Paid	INS TEST Difference	INS TEST Compliant / Underpayment with NADAC plus \$10.49 WV Law
00591544210	PREDNISON E 10 MG TABLET	07-Nov-25	39	WALGREENS #12276 12276	5055391	0.072820513	0	10.49	2.84	7.65	10	0.06017	10/22/2025		121%	No	No	12.83663	15.68	2.84337	COMPLIANT
17270074000	ALBUTEROL HFA 90 MCG INHALER	07-Nov-25	8.5	WALGREENS #12276 12276	5055391	1.916470588	0	10.59	10.59	0	10	1.91714	10/22/2025		61%	No	No	26.78569	36.88	10.09431	COMPLIANT
29300041301	CYCLOBENZAPRINE 5 MG TABLET	08-Nov-25	15	WALGREENS #12276 12276	5055391	0.721333333	0	10.49	10.49	0	0	0.02171	10/22/2025		3223%	No	No	10.81565	21.31	10.49435	COMPLIANT
42806071501	BENZONATA TE 200 MG CAPSULE	07-Nov-25	20	WALGREENS #12276 12276	5055391	0.133	0	10.49	2.66	7.83	10	0.10861	10/22/2025		122%	No	No	12.6622	15.32	2.6578	COMPLIANT