

# MEDICAID PHARMACY PRICING

## Opening the Black Box

February 19, 2019

This report is prepared in response to Kentucky Senate Bill 5, an ACT related to pharmacy benefits in the Medicaid Program, which amended KRS 205.647 and passed on April 13, 2018. The Cabinet for Health and Family Services (CHFS), the Office of Health Data and Analytics (OHDA), and the Department for Medicaid Services (DMS) appreciate the continued support of the Kentucky Legislature as we work together to ensure access to high quality health care services for our beneficiaries. This data collection effort will continue to evolve and will enable DMS to make improvements to our program extending beyond this initial report.

Kentucky Cabinet for Health and Family Service  
Office of Health Data Analytics  
Department for Medicaid Services



# Contents

Overview .....	2
Medicaid & Pharmacy Costs	
Senate Bill 5	
Background: The Pharmaceutical Flow of Money.....	3
PBM Pricing Models	
Methodology .....	4
Results .....	5
Spread Pricing	
Dispensing Fees	
Ingredient Costs	
Data Considerations & Limitations .....	7
Concerns for the Commonwealth.....	8
Other States' Initiatives .....	9
Recommendations .....	10
References .....	11
Appendices .....	12
Appendix A. Acronyms and Definitions	
Appendix B. Senate Bill 5 Data Request Template	

# Overview

## **Medicaid and Pharmacy Costs**

As of October 2018, nearly 73 million Americans were enrolled in Medicaid and the Children’s Health Insurance Program (CHIP), 50.7% of which were children.<sup>1</sup> In Kentucky, there were over 1.2 million Medicaid/CHIP enrollees as of October 2018—nearly one fourth of the state’s population.

Medicaid spending has continued to increase over the past five years in Kentucky. In 2014, Medicaid’s state general fund budget represented 15.5% of the total state budget—in 2018, that increased to 17.2%. For state fiscal year 2019, DMS projects pharmaceutical spending to be greater than \$92 million in the fee-for-service population alone.

Pharmacy costs are the fastest growing budget items in the Kentucky Medicaid budget. Additionally, due to federal law and mandates, Medicaid agencies have very limited ability to utilize management techniques to stem the increases in pharmaceutical prices. As such, the Centers for Medicare and Medicaid (CMS) projects that, over the next decade, prescription medications will be the fastest growing category of health spending, consistently outpacing other categories.<sup>2</sup>

Manufacturers participating in the Medicaid Drug Rebate Program provide rebates for covered outpatient drugs for beneficiaries enrolled with MCOs.<sup>3</sup> In 2017, DMS received almost \$1.3 billion in federal rebates from Medicaid managed care prescriptions. It is important to note that manufacturer rebates are a “fee” paid to the federal and state governments and mandate inclusion on the state Medicaid formulary and have other limitations over the pharmacy program. MCO beneficiaries fill almost 25 million prescriptions in Kentucky. Through current contracting, MCOs administer pharmacy benefits, including reimbursement, using a pharmacy benefit manager (PBM) for their beneficiaries.

## **Senate Bill 5**

In its 2018 regular session, Kentucky’s legislature passed Senate Bill 5 (SB5) to facilitate “transparency and to better assess contracts between entities providing Medicaid pharmacy benefits with public dollars.” SB5 passed on April 13, 2018 and was enacted July 1, 2018. The bill mandates that PBMs contracting with DMS MCOs must report financial and business relationship information regarding their interactions with MCOs and Kentucky-enrolled pharmacies. Within Kentucky, there are two PBMs operating on behalf of five MCOs. This report is a summary of the data provided by PBMs in response to the DMS request and a list of key recommendations from DMS regarding PBMs and pharmacy pricing. Certain defined terms used in this report are set forth in Appendix A.

# Background: The Pharmaceutical Flow of Money

The flow of money for pharmacy services is a complex process representing multiple entities exchanging fees and services, oftentimes in a bidirectional or multidirectional manner. Pertinent to the current report is a fundamental understanding of the flow of money to and from PBMs. Figure 1 provides a conceptual framework of pharmaceutical reimbursement in the retail setting.

DMS, as a plan sponsor, currently contracts with five MCOs to provide coordinated, comprehensive Medicaid health benefits to beneficiaries using a capitated payment system. MCOs administer health plans to their beneficiaries. This is a per-member-per-month payment from DMS to cover the estimated health care costs for those enrolled with a specific MCO. The MCOs then contract with a PBM to manage pharmacy services for their enrolled beneficiaries.

PBMs have the ability to negotiate with pharmacy services administration organizations (PSAOs), individual pharmacies, and chain-retail pharmacies to form pharmacy networks for their MCOs. PSAOs negotiate with PBMs and other entities on behalf of a group of independent-retail pharmacies. PBMs can leverage these networks and the large volume of beneficiaries they serve to reduce prescription costs, supplemental rebates, and other methodologies from drug manufacturers. Currently in Kentucky, four MCOs (Aetna, Humana, Passport, and WellCare) contract with CVS Caremark™ as their PBM and one MCO (Anthem) contracts with Express Scripts®.

MCOs in Kentucky and throughout the nation are evaluating their relationships with PBMs due to changing market forces in the healthcare industry. In Kentucky, several MCOs are considering changing PBMs, bringing PBM services in-house, or other options to address various components of PBM pricing and functionality, including transparency.

## PBM Pricing Models

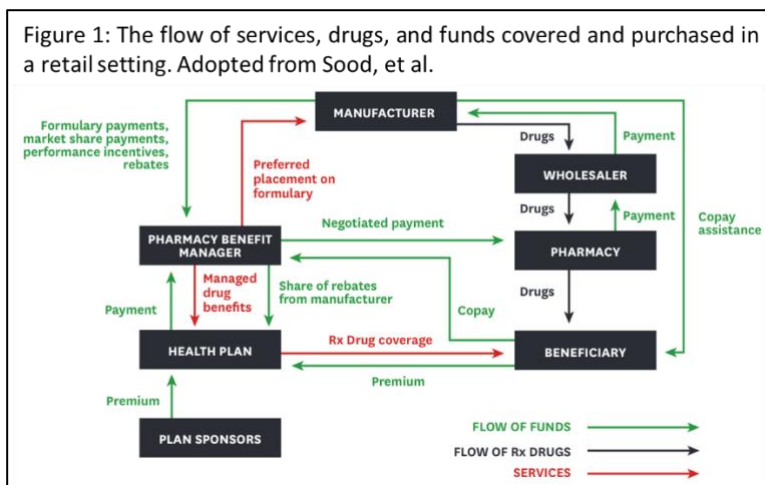
PBMs receive payment from multiple entities:

- MCOs provide payment for administering pharmacy services
- Beneficiaries pay a copay at the time of dispensing
- Manufacturers provide formulary payments, market share payments, performance incentives, and rebates
- Fees from pharmacies after the point-of-sale in the form of direct and indirect remuneration fees (DIR)

In turn, PBMs reimburse:

- Pharmacies who receive a negotiated payment for prescriptions based on ingredient cost and a professional dispensing fee
- MCOs who receive a negotiated portion of rebates received from drug manufacturers, as well as other fees deemed reimbursable in their contract

MCOs may choose to enter into a drug pricing agreement with a PBM in two ways: a traditional drug pricing model or pass-through drug pricing model. In a traditional or *spread pricing model*, the PBM charges the MCO an agreed-upon price for prescription drugs. This agreed-upon price is different from what the PBM pays the pharmacy for the



drug; this difference (the spread) is one model for PBMs to generate revenue. The MCO and Medicaid do not know the full amount of this revenue. In a *pass-through pricing model*, the PBM charges the MCO the same price for the medication (ingredient cost plus professional dispensing fee) that they reimburse the pharmacy plus an administrative fee, at either a per member or per claim level. Pass-through pricing is regarded as more transparent than spread pricing.

In addition to drug pricing models, PBMs can also generate income through rebates. DMS receives a portion of the federal rebate as required by federal law. Manufacturers participating in the Medicaid Drug Rebate Program must pass on any rebates for medications dispensed to MCO beneficiaries to DMS. However, PBMs and MCOs can gain additional rebates, also known as supplemental rebates, separately from the federal rebate. These rebates can then be shared between MCOs and PBMs as stated in any additional contracting. The revenue generated by PBMs and MCOs through drug pricing models and supplemental rebates can be used to create or support value-added services, such as adherence programs and formulary reviews, other clinical programs, or can be kept as profits.

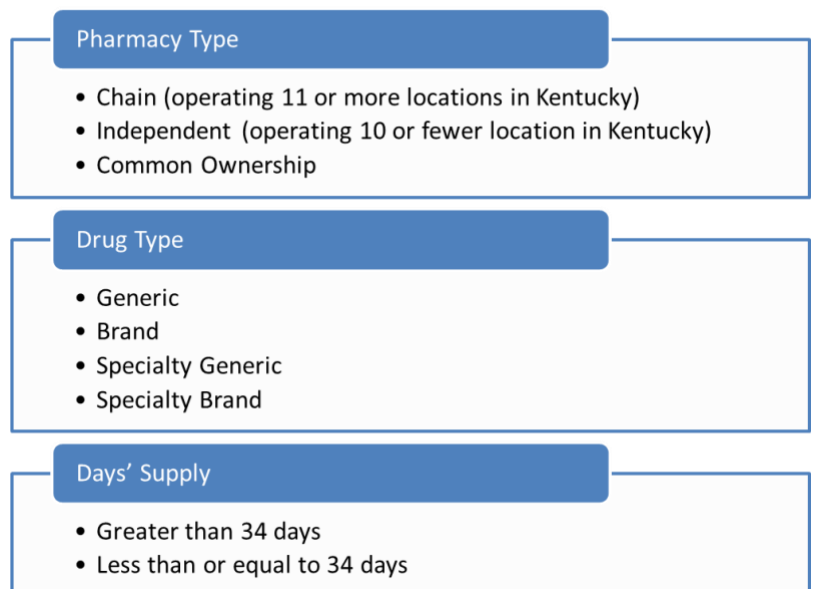
## Methodology

In order to gather the data necessary to conduct this study, OHDA created a template fulfilling the requirements set forth in SB5 (Appendix B). The template included a comprehensive data dictionary for the required data fields stated in SB5. This was then sent to the MCOs who subsequently sent the template to their PBMs for completion. The template applied to data pertaining to retail pharmacies enrolled with Kentucky DMS. Data fields were broken down by pharmacy type, drug type, and days' supply (Figure 2). Data collection occurred monthly since November 2018; data was collected for all of Calendar Year 2017 (CY2017) and Calendar Year 2018 (CY2018).

Aggregate amounts for DMS dollars paid to the MCO, or the amount MCO's paid to PBMs, and aggregate amounts representing DMS dollars not paid to pharmacies, or the spread, were also included along with a list of specialty drugs in the completion of the template.

The template was sent to Myers & Stauffer LC for independent review and recommendations were made contingent on feedback provided. Myers & Stauffer LC is one of the nation's leading experts on Medicaid pharmacy pricing and has worked with multiple state Medicaid agencies on reimbursement systems. Their input and advice was highly beneficial as this template was developed.

Figure 2: Senate Bill 5 Pharmacy, Drug, and Supply Categories



## Results

In CY2017, 24.7 million prescriptions were filled for DMS beneficiaries through MCOs. Of those prescriptions, 14.3 million (57.6%) were filled using a spread pricing model. Additionally, in CY2018, 24.7 million prescriptions were filled for DMS beneficiaries through MCO contracts, 14.2 million (57.5%) of which were filled using a spread pricing model.

### Spread Pricing

In CY2018, PBMs reported being paid \$957.7 million from DMS through their MCOs, for spread pricing contracts, \$123.5 million (12.9%) of which was not paid to pharmacies and kept by the PBMs as the spread. DMS total spend on prescription benefits was 3.9% higher in CY2018 vs. CY2017; additionally, during that same period, the spread increased 3.5% (Table 2). The spread was highest for chain-retail pharmacies and lowest for common ownership pharmacies (Table 1).

Pharmacy Type	MCO Payments to PBM		Spread		Spread (%)	
	CY2017	CY2018	CY2017	CY2018	CY2017	CY2018
> 11 Locations	\$448,433,890	\$426,620,909	\$51,503,257	\$92,338,069	11.49%	21.64%
≤ 10 Locations	\$346,603,798	\$372,177,767	\$30,420,473	\$23,446,745	8.78%	6.30%
Common Ownership	\$125,381,104	\$158,898,647	\$4,807,137	\$7,731,040	3.83%	4.87%
<b>Grand Total</b>	<b>\$920,418,792</b>	<b>\$957,697,323</b>	<b>\$86,730,868</b>	<b>\$123,515,854</b>	<b>9.42%</b>	<b>12.90%</b>

Table 1. Spread by Pharmacy Type

### Dispensing Fees

In July 2018, at the direction of the DMS, MCO's were mandated to reimburse pharmacies an additional \$2 per prescription above the current professional dispensing fee. Counts and claims were therefore divided into two periods—January 2017 to June 2018 (18 months) and July 2018 through November 2018 (5 months)—to examine the impact of this change. The overall average professional dispensing fee paid by PBMs to pharmacies increased \$1.88 per prescription between these time periods. Chain-retail pharmacies had the smallest average increase (\$1.73/prescription), followed by common ownership (\$1.98/prescription) and independent-retail (\$2.04/prescription). Non-specialty generic medications had the greatest relative percent increase in professional dispensing fees between time periods (389% relative increase), with specialty brand medications having the greatest dollar increase between time periods (\$2.98/prescription). Full results can be found in Table 2.

Pharmacy Type	Non-Specialty Brand	Non-Specialty Generic	Specialty Brand	Specialty Generic	Overall Drug Average
<b><u>January 2017 - June 2018</u></b>					
> 11 Locations	\$0.71	\$0.78	\$1.98	\$0.61	\$0.77
≤ 10 Locations	\$0.54	\$0.53	\$6.69	\$2.97	\$0.56
Common Ownership	\$0.42	\$0.45	\$24.44	\$8.80	\$0.73
<b>Total</b>	<b>\$0.62</b>	<b>\$0.65</b>	<b>\$10.01</b>	<b>\$2.52</b>	<b>\$0.68</b>
<b><u>July 2018 – December 2018</u></b>					
> 11 Locations	\$2.37	\$2.52	\$4.29	\$2.11	\$2.50
≤ 10 Locations	\$2.42	\$2.57	\$10.27	\$5.21	\$2.60
Common Ownership	\$2.22	\$2.40	\$27.69	\$10.75	\$2.71
<b>Total</b>	<b>\$2.38</b>	<b>\$2.53</b>	<b>\$12.99</b>	<b>\$4.49</b>	<b>\$2.56</b>

Table 2. Average Professional Dispensing Fee by Pharmacy Type and Drug Type

\*Note January 2017 to June 2018 is over an 18-month span and July 2018 to December 2018 is a 5-month span

### **Ingredient Costs**

The average ingredient cost by drug type and pharmacy type were aggregated to compare by year (Table 3). In all three pharmacy types, the ingredient cost of non-specialty brand drugs increased between CY2017 and CY2018. All three pharmacy types saw a decrease in ingredient cost for non-specialty generic drugs from CY2017 to CY2018. Both specialty brand and specialty generic drug ingredients costs decreased for chain-retail pharmacies. This was in contrast to an increase in ingredient costs for specialty drugs in independent-retail and common ownership pharmacies. Overall the aggregated average price of a drug increased 6.2% between time periods, from \$55.01 per prescription to \$58.63.



Pharmacy Type	Drug Type	CY2017	CY2018
<b>&gt; 11 Locations</b>	Non-Specialty Brand	\$237.47	\$258.74
	Non-Specialty Generic	\$14.47	\$10.97
	Specialty Brand	\$5,018.23	\$4,743.83
	Specialty Generic	\$111.58	\$93.91
<b>&gt; 11 Locations Total</b>		<b>\$43.48</b>	<b>\$44.39</b>
<b>≤ 10 Locations</b>	Non-Specialty Brand	\$251.39	\$285.52
	Non-Specialty Generic	\$17.56	\$16.21
	Specialty Brand	\$4,354.53	\$4,432.88
	Specialty Generic	\$256.67	\$273.53
<b>≤ 10 Locations Total</b>		<b>\$61.04</b>	<b>\$64.94</b>
<b>Common Ownership</b>	Non-Specialty Brand	\$243.39	\$259.06
	Non-Specialty Generic	\$12.54	\$10.05
	Specialty Brand	\$6,546.38	\$6,933.84
	Specialty Generic	\$673.28	\$740.91
<b>Common Ownership Total</b>		<b>\$100.65</b>	<b>\$116.22</b>
<b>Grand Total</b>		<b>\$55.01</b>	<b>\$58.63</b>

Table 3. Average Ingredient Cost by Pharmacy Type and Drug Type

## Data Considerations and Limitations

The results presented in this report are of aggregate values that DMS obtained from PBMs and may not represent all of the money(s) exchanged for these transactions. Specifically, DIR fees, including recoupments based on generic effective rate (GER) or brand effective rate (BER) have not been included in the determination of the spread. While these other fees have an impact on the final net revenue to a PBM, much of this is not collected at point of sale.

The data collected applied only to retail pharmacies enrolled in Kentucky Medicaid. The metrics of this initial analysis do not account for variances in the drug mix provided by different pharmacy types including specialty pharmacies and mail order pharmacies.

Collecting drug ingredient cost and professional dispensing fees at the mean and median level presents challenges to extrapolating the true value of the drug costs. The mean values were taken as a weighted average among the MCOs using total claims utilization. Therefore, the results of the analysis provide a robust understanding of the data.

Each MCO-PBM utilized individual drug lists to define non-specialty brand, non-specialty generic, specialty brand, and specialty generic drugs. There is no federally or statewide recognized specialty drug list and each MCO was asked to use their MCO-specific specialty drug lists for the analysis. Furthermore, pharmacy types are reported as stated in the text of SB5. Independent-retail pharmacies and chain-retail pharmacies are not standardized among the MCOs and was up to the discretion of the MCO to categorize pharmacies.

Finally, this data has not been independently verified at the claims level. PBMs completed the data templates at the aggregate level with directions from DMS. Contractor reporting requirements are in Section 38 of the Medicaid MCO contract with verification of the accuracy of the data submitted to DMS.



## Concerns for the Commonwealth

DMS has collaborated with contracted MCOs, statewide pharmacy organizations, and other state agencies to understand the implications of PBM contracts for Medicaid. While understanding the amounts of the spread are an important first step, the final impact on the Medicaid program, pharmacies and MCOs will need to be quantified. As discussed in this report, contractual agreements between PBMs and PSAOs, independent-retail pharmacies, and chain-retail pharmacies may set additional DIR fees to be paid back to the PBM, which include but are not limited to:

- In-network fees
- Transmission fees
- Quality fees
- Customer service fees
- GER/BER fees

From discussions with independent-retail pharmacy owners and pharmacy organizations, these fees may be assessed at the end of fiscal periods, which may create negative reimbursement scenarios for dispensed medications or potential tax issues. Pharmacists have expressed significant concern regarding the inflated percentages in BERs and GERs, which may be determined by a different methodology than payments to MCOs. Pharmacists have also expressed concern that claims may not accurately reflect pharmacy reimbursement by the PBM, as the actual net payment by the PBM at the end of the year may ultimately be lower than ingredient and operational costs. These fees are not included in the spread calculation and these additional payments back to the PBM are not included in this report. Currently, there is no transparent system to capture these dollar amounts. Therefore, the full impact of fees assessed is not known, but may threaten stability of pharmacies and the pharmacy benefit offered to our Medicaid beneficiaries.

Additionally, there is concern that spread pricing is not correctly accounted for in the state's medical loss ratio (MLR). The MLR is a designated rate between DMS and MCOs to spend a certain percentage of dollars on medical care (vs. administrative costs). This rate is established by the Kentucky Legislature at 90%. With the lack of transparency surrounding spread pricing, the effect of the MLR may not be accurately represented. DMS is conducting further research into this issue to ensure compliance with the required MLR.

## State Initiatives

Since 2017, 20 states have passed 31 different bills related to PBM regulations. These include bills banning gag clauses preventing pharmacists from sharing lower cost options with their customers, requiring PBMs to be licensed in-state, preventing spread pricing models, and requiring PBMs to report pricing and rebate information to promote transparency. The following are representative examples from selected states:

- In 2017, **Oklahoma** moved to a value-based pricing model where supplemental rebates are tied to specific health outcomes in patients prescribed certain medications. The state contracts with the manufacturer and rewards patient adherence to medications. While the cost for the medication is higher, the cost savings come from decreased hospitalizations seen with other drug options. Results on the net savings of this model have not been released.
- After the release of the State Auditor's report on Medicaid Managed Care Services, **Ohio** moved all PBM contracts from a spread pricing model to a pass-through model. This was in response to an identified average spread of 8.9% on all Ohio Medicaid prescriptions. The State Auditor provided recommendations to alternative contract models, rebate auditing, and increased reporting requirements to keep PBMs transparent.
- In 2014, **Texas** became one of the first states to closely regulate PBMs. Using a managed care system, all MCO-PBM contracts are uniform subcontracts to the state and MCOs are held responsible for all duties performed by the PBM. In order to keep costs low for the state, regulations prohibit PBMs from using spread pricing, receiving additional rebates from manufacturers, and using unauthorized clinical edits. Texas use of a Uniform Managed Care Contract dictates the role and operations of each of their 20 MCOs and 6 PBMs.
- In July 2017, **West Virginia** carved out all pharmacy benefits from their MCOs. The state has returned to the same system it had prior to managed care's implementation in 2013. The state uses West Virginia University College of Pharmacy to help advise providers to make better clinical decisions and the return to the fee-for-service model is estimated to have saved the state at least \$50 million; however, a full report showing this data has not yet been released.

# Recommendations

Based on available evidence and the preliminary data reported in response to SB5, DMS has eight key recommendations to increase transparency, promote pharmacy sustainability, and ultimately improve the care of Kentucky's Medicaid population.

**Recommendation 1.** Mandate pass-through contracting for all MCO-PBM contracts for pharmacy benefit services. A transparent drug pricing model between the MCOs, PBMs, and pharmacies allows DMS to monitor financial expenses related to pharmacy as line level transactions. Under the pass-through contracting model, the MCO is charged a flat administrative fee from the PBM per claim or per member.

**Recommendation 2.** Remove all DIR fees including transactional fees, in-network fees, GER and BER fees, and any and all claw back fees to pharmacies charged by PBMs. PBMs should function to pay the claim to pharmacies at the ingredient cost and professional dispensing fee without any additional charges at or after the point of sale. DIR fees add to the complexity of pharmacy pricing and fail to provide fair future projections for pharmacies.

**Recommendation 3.** Evaluate the implementation of a pricing methodology to managed care Medicaid pharmacy benefits. Using a similar lesser of logic methodology, medications would be reimbursed the same as Kentucky's fee-for-service population. Drugs would be priced at the lesser of logic plus a professional dispensing fee paid to pharmacies. Covered medications should be reimbursed at the lowest of the:

1. National Average Drug Acquisition Cost (NADAC)
2. Wholesale acquisition cost (WAC)
3. Federal upper limit (FUL)
4. Maximum allowable cost (MAC)
5. Usual and customary price (U & C)
6. A negotiated price between the manufacturer and PBM

**Recommendation 4.** Require an annual PBM transparency report to be delivered to DMS for each MCO-PBM contract. This report would contain the aggregated rebate amount collected by the PBM and MCOs from all manufacturers. The report would also contain the aggregated administrative fees collected by the PBM from all manufacturers and from all MCOs. The report would ensure continual monitoring of PBM actions in the state and their fiscal responsibilities to DMS.

**Recommendation 5.** Ensure the MLR review incorporates drug rebates and PBM administrative fees as part of an independent MLR review process.

**Recommendation 6.** Explore efficiency incentives for MCOs and their subsequent PBM contracts. Including, but not limited to adjusting fees and charges to MCOs and PBMs based upon pre-determined metrics by DMS for pharmacy-related outcomes.

**Recommendation 7.** Prohibit PBMs from providing financial incentives in the form of copayments, deductibles, or premiums as incentives to use specific retail, mail order, or other network pharmacies in which the PBM has common ownership. By doing so, PBMs do not gain an unfair advantage over the pharmacy businesses in the state.

**Recommendation 8.** DMS requires continued review of claims-level data, refinement of the data collection process, and monitoring of the pharmacy payment program to improve Kentucky Medicaid's ability to maximize its resources on behalf of its pharmacies and beneficiaries.

## References

1. Centers for Medicare and Medicaid Services. November 2018 Medicaid & CHIP Enrollment Data Highlights. November 2018; Accessed from <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>. Jan 12, 2019
2. Cuckler G, et al. National Health Expenditure Projections, 2017-2016. *Health Affairs* 37(3); March 2018
3. Sood N, et al. The flow of money through the pharmaceutical distribution system. June 2017; Accessed from <https://healthpolicy.usc.edu/research/flow-of-money-through-the-pharmaceutical-distribution-system> Jan 12, 2019.

## Appendix A. Acronyms and Definitions

**Brand Effective Rate (BER).** A contractual agreement between PBMs and pharmacies stipulating the average amount per brand drug that PBMs will reimburse pharmacies (e.g. Average Wholesale Price minus a fixed percentage). Periodically, a PBM will determine the actual average reimbursement per brand drug and, if it is over the contracted agreement, assess DIR fees to pharmacies in the amount that the pharmacies were over-reimbursed for brand name medications.

**Common Ownership Pharmacy.** Any pharmacy with which the pharmacy benefit manager shares common ownership, management, or control; or which are owned, managed, or controlled by any of the pharmacy benefit manager's management companies, parent companies, subsidiary companies, jointly held companies, or companies otherwise affiliated by a common owner, manager, or holding company; or which share any common members on the board of directors; or which share managers in common.

**Department for Medicaid Services (DMS).** Kentucky's Department for Medicaid Services.

**Direct and Indirect Remuneration (DIR) fees.** Additional fees outside of administration fees provided to the PBM after the point-of-sale. Examples of DIR include: discounts, chargebacks or rebates, cash discounts, free goods contingent on a purchase agreement, up-front payments, coupons, goods in kind, free or reduced-price services, grants, or other price concessions or similar benefits from manufacturers, pharmacies or similar entities (42 CFR 423.308).

**Generic Effective Rate (GER).** A contractual agreement between PBMs and pharmacies stipulating the average amount per generic drug that PBMs will reimburse pharmacies (e.g. Average Wholesale Price minus a fixed percentage). Periodically, a PBM will determine the actual average reimbursement per generic drug and, if it is over the contracted agreement, assess DIR fees to pharmacies in the amount that the pharmacies were over-reimbursed for generic medications.

**Managed Care Organization (MCO).** Third party administrators of medical and pharmacy benefits on behalf of the Department for Medicaid Services (DMS). There are currently five MCOs contracting with DMS: Aetna, Anthem, Humana, Passport, and WellCare.

**Office of Health Data and Analytics (OHDA).** The Division of Analytics in the Office of Health Data & Analytics is responsible for coordinating the data analytic initiatives of the various departments that regulate health care and social services. The Division of Analytics retains sole oversight of policy and research matters for these program areas.

**Pharmacy Benefit Manager (PBM).** Third-party administrators of pharmacy benefit services for MCOs. The services provided by the PBMs to the MCOs may include but are not limited to claims adjudication, customer service, clinical services (e.g. prior authorizations), drug utilization reviews, and mail-order/specialty pharmacies. CVS Caremark™ is the PBM for Aetna, Humana, Passport, and WellCare while ExpressScripts® is the PBM for Anthem.

**Pharmacy Services Administration Organization (PSAO).** PSAOs act as unions on behalf of independent-retail pharmacies, wherein for a fee, PSAOs negotiate contracts with PBMs leveraging the collective power of many independent-retail pharmacies.

# Appendix B. Senate Bill 5 Data Request Template

# Kentucky Department for Medicaid Services

## #173\_MCO-PBM Compliance Report for POS Transactions

### Instructions

<b>Report ID</b>	Identify the name of the Managed Care Organization (MCO), the start and end date of the reporting period, and the date the report was ran.
------------------	--

<b>Ownership and Related Entities</b>	Enter the details for each MCO, Pharmacy Benefit Manager (PBM), and related entities separately. Include entities covered by PBM including all pharmacy related entities.
---------------------------------------	---

**Data collection will be broken down to 4 distinct categories: pharmacy type, drug type, supply volume, and specific metrics. Each tab represents a pharmacy type and a supply volume.**

<b>Pharmacy Types</b>	Chain-retail pharmacies as identified by MCO/PBM database
	Pharmacies with 11 or more locations (SB5 definition)
	Independent-retail pharmacies as identified by MCO/PBM database
	Pharmacies with 10 or fewer locations (SB5 definition)
	Common ownership pharmacies

<b>Drug Type</b>	Non-specialty brand
	Non-specialty generic
	Specialty brand
	Specialty generic

<b>Supply Volume</b>	Less than a 34 days supply (DS)
	Greater than a 34 days supply

<b>Metrics</b>	Ingredient cost
	Dispensing fee
	Other fees
	Remunerations
	Total claims
	Medicaid dollars paid to PBM
	Medicaid dollars paid to PBM not paid to Kentucky Medicaid enrolled pharmacies

**Please provide a methodology report as to how pharmacy types, drug types, and supply volumes were pulled.**

**Please provide a complete list of all specialty medications reimbursed for the reporting period. Include AHFS codes and NDCs for specialty medications.**



**Kentucky Department for Medicaid Services  
#173\_MCO-PBM Compliance Report for POS Transactions**

**Data Dictionary**

<b>Term</b>	<b>Definition</b>
<b>Chain-Retail Pharmacies</b>	Pharmacies identified in MCO/PBM database as a Kentucky Medicaid enrolled chain-retail pharmacy. Include all out of state pharmacies that apply.
<b>Any &gt;11 Pharmacies</b>	Retail pharmacies enrolled in Kentucky Medicaid which operate more than 11 locations. Include all out of state pharmacies that apply.
<i>NOTE: "Chain-Retail" and "Any&gt;11" pertains to similar data. One format allows the data to be collected in a way that is uniform within the MCO/PBM database and the latter utilizes the Senate Bill 5 text</i>	
<b>Independent-Retail Pharmacies</b>	Pharmacies identified in MCO/PBM database as a Kentucky Medicaid enrolled independent-retail pharmacy. Include all franchise pharmacies that apply. Include all out of state pharmacies that apply.
<b>Any ≤10 Pharmacies</b>	Retail pharmacies enrolled in Kentucky Medicaid which operate 10 or fewer locations. Include all franchise pharmacies that apply. Include all out of state pharmacies that apply.
<i>NOTE: "Independent-Retail" and "Any≤10" pertains to similar data. One format allows the data to be collected in a way that is uniform within the MCO/PBM database and the latter utilizes the Senate Bill 5 text</i>	
<b>Common Ownership Pharmacy</b>	Where the pharmacy benefit manager shares common ownership, management; or which are owned, managed, or controlled by any of the pharmacy benefit manager's management companies, parent companies, subsidiary companies, jointly held companies, or companies otherwise affiliated by a common owner, manager, or holding company; or which share any common members on the board of directors; or which share managers in common, whether the relationship is created by legal business structure or contractual obligations.
<b>Non-Specialty Brand Drug</b>	Registered trade name of a drug that was originally marketed under an original new drug application approved by the Food and Drug Administration. This includes all drugs reimbursed at brand price as identified by MCO/PBM database.
<b>Non-Specialty Generic Drug</b>	A drug that contains identical amounts of the same active ingredients in the same dosage form and that meets official compendia or other applicable standards of strength, quality, purity, and identity in comparison with the brand name drug. This includes all drugs reimbursed at the generic price as identified by MCO/PBM database.
<b>Specialty Brand Drug</b>	Drug that treats chronic, complex or life threatening conditions, are typically costly and require intensive clinical monitoring, complex patient actions and/or special handling by the pharmacy. Identified by brand status and reimbursement by MCO/PBM.
<b>Specialty Generic Drug</b>	Drug that treats chronic, complex or life threatening conditions, are typically costly and require intensive clinical monitoring, complex patient actions and/or special handling by the pharmacy. Identified by generic status and reimbursement by MCO/PBM.
<b>Fills Up to 34 Days Supply</b>	Prescriptions filled for up to a 34 days supply.
<b>Fills for Greater Than a 34 Days Supply</b>	Prescriptions filled for greater than a 34 days supply.
<b>Ingredient Cost</b>	Costs reimbursed by the PBM to the pharmacy for a drug product. This cost does not include the dispensing fee.
<b>Dispensing Fee</b>	Professional fee a pharmacist receives from the PBM to dispense a medication.
<b>Other Fee</b>	Any additional administrative fees or charges paid to the pharmacy excluding ingredient cost, dispensing fee, and remuneration fees.
<b>Total Claims</b>	The total number of claims reimbursed in a specific reporting period.
<b>Medicaid Dollars Paid to PBM</b>	The total amount of Kentucky Medicaid dollars paid to the PBM by the MCO.
<b>Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies</b>	The total amount of Kentucky Medicaid dollars paid to the PBM by the MCO which were not subsequently paid to a pharmacy enrolled with Kentucky Medicaid.
<b>Remuneration Fees</b>	Any direct fee or indirect fee, charges of any kind, or assessment of any kind imposed by a pharmacy benefit manager on a pharmacy retroactively rather than deducted from clean claims at point-of-sale on a real-time basis. Fees imposed by the pharmacy benefit manager to the pharmacy or the entity through which the pharmacy contracts with the pharmacy benefit manager, including, but not limited to: fees for network participation, periodic reimbursement conciliations, failure to comply with quality measures, and the gap between a target reimbursement rate in a pharmacy agreement and the aggregated rate actually realized by a pharmacy. These fees often are assessed at different intervals rather than at point-of-sale and may be fees imposed by pharmacy benefit managers on pharmacy providers after a drug claim is submitted, adjudicated, and even paid out to a pharmacy or retroactively clawed back from a portion of the claim already paid rather than deducting from point-of-sale claims on a real-time basis.

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**

**Report ID**

<b>MCO Name:</b>	
<b>Reporting Period Start:</b>	
<b>Report Period End:</b>	
<b>Report Run Date:</b>	

**Kentucky Department for Medicaid Services  
#173\_MCO-PBM Compliance Report for POS Transactions**

**Ownership and Related Entities of the PBM**

**MCO Disclosure**

MCO Name		<b>Subsidiaries</b>	<b>Relationship to MCO</b>
Address 1			
Address 2			
City			
State			
Zip Code			
Phone			
email			

**MCO Officers/Ownership**

<b>Name</b>	<b>Title</b>

**PBM Disclosure**

<b>PBM Name</b>		<b>PBM Parent</b>	<b>Relationship to PBM</b>
	<b>Address 1</b>		
	<b>Address 2</b>		
	<b>City</b>		
	<b>State</b>		
	<b>Zip Code</b>		
	<b>Phone</b>		
	<b>email</b>		

**PBM Officers/Ownership**

<b>Name</b>	<b>Title</b>

**Related Entities of the PBM**

<b>Entity Name</b>		<b>Relationship to PBM</b>	<b>Detail for "Other"</b>
	<b>Address 1</b>		
	<b>Address 2</b>		
	<b>City</b>		
	<b>State</b>		
	<b>Zip Code</b>		
	<b>Phone</b>		
	<b>email</b>		
<b>Business Type</b>		<b>Relationship End Date (if applicable)</b>	

**Related Entities of the PBM Officers/Ownership**

<b>Name</b>	<b>Title</b>	<b>Detail for "Other"</b>

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Chain-Retail Pharmacies with <34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Chain-Retail Pharmacies with >34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Any >11 Pharmacies with <34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Any >11 Pharmacies with >34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		



**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Independent-Retail Pharmacies with <34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Independent-Retail Pharmacies with >34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Any ≤10 Pharmacies with <34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Any ≤10 Pharmacies with >34 Days Supply**

Non-Specialty Brand																
	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

Non-Specialty Generic																
	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

Specialty Brand																
	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

Specialty Generic																
	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Common Ownership Retail Pharmacies with <34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**  
**Common Ownership Retail Pharmacies with >34 Days Supply**

**Non-Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Non-Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Brand**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

**Specialty Generic**

	Mean Ingredient Cost	Minimum Ingredient Cost	25th Percentile Ingredient Cost	Median Ingredient Cost	75th Percentile Ingredient Cost	Maximum Ingredient Cost	Mean Dispensing Fee	Minimum Dispensing Fee	25th Percentile Dispensing Fee	Median Dispensing Fee	75th Percentile Dispensing Fee	Maximum Dispensing Fee	Mean Other Fees	Median Other Fees	Remuneration Fees	Total Claims
January																
February																
March																
April																
May																
June																
July																
August																
September																
October																
November																
December																

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		
Total		

**Kentucky Department for Medicaid Services**  
**#173\_MCO-PBM Compliance Report for POS Transactions**

**Cumulative**

	Medicaid Dollars Paid to PBM	Medicaid Dollars Paid to PBM Not Paid to Kentucky Medicaid Enrolled Pharmacies	Remunerations Fees - All Retail Pharmacies
January			
February			
March			
April			
May			
June			
July			
August			
September			
October			
November			
December			
Total			