



*New Jersey Office of the Attorney General
Division of Consumer Affairs*



**Prescription Drug Price
Transparency
Data Collection
Manual**

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Prescription Drug Price Transparency Data Collection Manual

Table of Contents

Overview.....	2
Definitions.....	2
Reporting Entity Registration	3
Submission Requirements.....	3
Manufacturer Reporting	4
Manufacturer Price Increase Notification.....	4
Manufacturer Price Increase Report	5
Manufacturer New Drug Notification	6
Manufacturer New Drug Report.....	7
Carrier Reporting.....	7
Reporting Categories	8
Carrier Summary Report	8
Carrier Drug Group Category Report.....	8
Carrier Prescription Drug Category Report.....	9
Carrier Drug Group Report.....	9
Carrier Prescription Drug Report	10
Pharmacy Benefits Manager Reporting	10
PBM Drug Group Report	11
PBM Prescription Drug Report	13
Wholesaler Reporting.....	16
Wholesaler Drug Group Report.....	16
Wholesaler Prescription Drug Report.....	17
Pharmacy Services Administrative Organization Reporting	18
PSAO Report	18
Method of Submission	19
Appendix A – Manufacturer Price Increase Notification Data Specifications	21

Appendix B – Manufacturer Price Increase Report Data Specifications.....	22
Appendix C – Manufacturer New Drug Notification Data Specifications.....	24
Appendix D – Manufacturer New Drug Report Data Specifications	25
Appendix E – Carrier Summary Report Data Specifications	26
Appendix F – Carrier Drug Group Category Report Data Specifications	27
Appendix G – Carrier Prescription Drug Category Report Data Specifications	28
Appendix H – Carrier Drug Group Report Data Specifications	29
Appendix I – Carrier Prescription Drug Report Data Specifications	31
Appendix J – PBM Drug Group Report Data Specifications	33
Appendix K – PBM Prescription Drug Report Data Specifications.....	38
Appendix L – Wholesaler Drug Group Report Data Specifications.....	43
Appendix M – Wholesaler Prescription Drug Report Data Specifications	46
Appendix N – PSAO Report Data Specifications.....	48

Overview

This Data Collection Manual clarifies provisions for submitting prescription drug price transparency notifications and reports to the Division as required under N.J.S.A. 45:14-82.2 et seq., and N.J.A.C. 13:45K. Terms used in this Data Collection Manual have the meaning set forth in N.J.A.C. 13:45K and as defined in the Definitions section below.

The Data Collection Manual addresses:

- Reporting entity registration;
- Description of requirements for the content and time frame for submitting reporting entity notifications and reports; and
- Establishment of format and manner for the data reported.

Definitions

Unless the context indicates otherwise, the following words and phrases shall have the meanings provided below:

“Enrollee” means an individual who receives prescription drug benefits from a carrier, and any spouse or dependent who is covered under the same policy.

“National Drug Code” or “NDC” means the three-segment numerical code maintained by the Federal Food and Drug Administration that includes a labeler segment, a product segment, and a

package segment for a drug product and that has an 11-digit format consisting of five digits in the first labeler segment, four digits in the second product segment, and two digits in the third package segment. A three-segment numerical code shall be considered to be converted to an 11-digit format when, as necessary, at least one “0” has been added to the front of each segment containing less than the specified number of digits such that each segment contains the specified number of digits.

“Prescription drug network” means a group of pharmacies that have contracted with a carrier or pharmacy benefit manager to provide covered products and services to enrollees.

“Prescription drug user” means an enrollee for which at least one pricing unit of a prescription drug was dispensed or administered during the prior calendar year.

Reporting Entity Registration

A reporting entity shall register with the Division by January 31 of each calendar year on the Division website at <https://www.njconsumeraffairs.gov/dau>. To register, a reporting entity must provide the following information:

1. Reporting entity name;
2. Business address;
3. Business phone number;
4. The name and title of an individual or individuals authorized by the reporting entity to receive communications from the Division regarding compliance with P.L.2023, c.106 (C.45:14-82.2 et seq.), and the following information for the authorized individual or individuals:
 - a. Business mailing address;
 - b. Business email address; and
 - c. Business phone number.

A reporting entity must update its registration each time there is a change to any of the information specified above. Reporting entities are strongly encouraged to add two or more individuals when registering to ensure continuity of access and prevent delays.

An entity that includes more than one type of reporting entity must register for each type of reporting entity it encompasses.

Submission Requirements

Reporting entities must submit timely, accurate, and complete reports to the Division as specified for each type of report. Reporting entities must certify the accuracy and completeness of any submissions to the Division under the penalty of perjury, including those made by subsidiaries,

employees, and contractors or other third parties engaged to submit information on the reporting entity's behalf.

This section details separate submission requirements for:

1. Manufacturer notifications and reporting related to existing prescription drugs with certain levels of WAC and increases in WAC;
2. Manufacturer notifications and reporting related to new drugs with certain levels of WAC at introduction for sale in the State;
3. Carrier reporting related to the amount of spending and spending increases for prescription drugs and drug groups, in aggregate and by reporting category, in the previous calendar year;
4. Pharmacy benefits manager reporting related to the administration of prescription drug claims for New Jersey residents during the previous calendar year for prescription drugs and drug groups specified by the Division;
5. Wholesaler reporting related to the distribution of prescription drugs within or into New Jersey during the previous calendar year for prescription drugs and drug groups specified by the Division; and
6. Pharmacy services administrative organization reporting related to negotiated reimbursement rates and schedules of fees during the previous calendar year.

Reporting entities may also submit additional documentation and information to support the submissions required under the Act.

Confidentiality of information reported to the Division by any reporting entity pursuant to this Data Collection Manual is addressed in N.J.S.A. 45:14-82.10.

Manufacturer Reporting

Manufacturers must submit notifications and reports to the Division when the WAC price for certain prescription drugs is increased over specified thresholds during a 12-month period and when certain prescription drugs are introduced for sale in the State at a WAC price that exceeds specified thresholds.

If available, manufacturers must submit State-specific data for all data elements that are specified for reporting at a state level. If a manufacturer does not have access to State-specific data required for all data elements that are specified for reporting at a state level, and has no way of obtaining such data, the manufacturer shall report all data at a national level. Manufacturers that report data at a national level must certify and provide proof satisfactory to the Division that the manufacturer does not have access to State-specific data and has no way of obtaining it.

Manufacturer Price Increase Notification

A manufacturer is required to notify the Division for each prescription drug for which there is a WAC price increase:

1. Of 10 percent or more over the previous 12-month period for:
 - a. A brand-name drug; or
 - b. A generic drug having a WAC before the price increase of more than \$100.00.
2. Of 40 percent or more over the previous 12-month period for a generic drug having a WAC before the price increase of more than \$10.00 and less than \$100.00.

The notice must be filed with the Division by 11:59PM Eastern Time no later than 10 days after the price increase goes into effect and include the following information:

1. The NDC of the prescription drug;
2. Description of the prescription drug to include the following:
 - a. Product name;
 - b. Dosage form;
 - c. Strength;
 - d. Package size;
3. Effective date of WAC increase;
4. WAC after the price increase; and
5. Percent increase over previous WAC.

Manufacturer Price Increase Report

A manufacturer is required to file a Price Increase Report with the Division for each prescription drug that requires a Price Increase Notification. The report must be filed with the Division by 11:59PM Eastern Time no later than 20 days after the price increase goes into effect and include the following information:

1. The information required to be provided with the Price Increase Notification, if not previously provided;
2. Number of units of the prescription drug sold by the manufacturer for distribution in the State in the 12-month period prior to the price increase;
3. Projected number of units of the prescription drug to be sold by the manufacturer for distribution in the State in the 12-month period following the price increase;
4. Date of introduction for sale in the State;
5. WAC on date of introduction for sale in the State;
6. Baseline WAC, which is the WAC of the prescription drug product on the later of:
 - a. The date one year prior to the date of the price increase;
 - b. The date of introduction for sale in the State; or
 - c. The acquisition date;

7. Gross revenue from sales of the prescription drug for distribution in the State during the 12-month period prior to the price increase, expressed in U.S. dollars per pricing unit;
8. Projected gross revenue from sales of the prescription drug for distribution in the State during the 12-month period following the price increase, expressed in U.S. dollars per pricing unit;
9. Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State incurred by the manufacturer during the 12-month period prior to the price increase for:
 - a. Manufacturing the prescription drug;
 - b. Marketing the prescription drug;
 - c. Distributing the prescription drug; and
 - d. Rebates, chargebacks, and retrospective price concessions;
10. Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State projected to be incurred by the manufacturer during the 12-month period following the price increase for:
 - a. Manufacturing the prescription drug;
 - b. Marketing the prescription drug;
 - c. Distributing the prescription drug; and
 - d. Rebates, chargebacks, and retrospective price concessions;
11. The reason or reasons that the manufacturer increased the WAC of the prescription drug;
12. General comments and/or additional information related to the data submitted, if applicable (optional); and
13. Any documentation to support the data submitted, if applicable (optional).

Manufacturers may provide the data elements required for a Price Increase Report concurrent with a Price Increase Notification filed no later than 10 days after the price increase goes into effect.

Manufacturer New Drug Notification

A manufacturer is required to notify the Division if it introduces:

1. A new drug in the State that has a WAC that exceeds the Medicare Part D specialty threshold; or
2. A biosimilar in the State that has a WAC that is not at least 15 percent less than the WAC of the referenced brand biologic at the time the biosimilar is launched.

The notice must be filed with the Division by 11:59PM Eastern Time no later than 10 days after market introduction and include the following information:

1. The NDC of the prescription drug;
2. Description of the prescription drug to include the following:
 - a. Product name;
 - b. Dosage form;
 - c. Strength; and
 - d. Package size;
3. Date of introduction for sale in the State; and
4. WAC at market introduction.

Manufacturer New Drug Report

A manufacturer is required to file a New Drug Report with the Division for each prescription drug that requires a New Drug Notification. The report must be filed with the Division by 11:59PM Eastern Time no later than 20 days after the date of market introduction and include the following information:

1. The information required to be provided with the New Drug Notification, if not previously provided;
2. Projected patient volume in the State for the prescription drug in the 12-month period following market introduction;
3. Projected patient volume in the State for the drug group in the 12-month period following market introduction of the drug;
4. Projected total gross revenue from sales of the prescription drug for distribution in the State during the 12-month period following market introduction;
5. Projected total gross revenue from sales of the drug group for distribution in the State during the 12-month period following market introduction of the drug;
6. General comments and/or additional information related to the data submitted, if applicable (optional); and
7. Any documentation to support the data submitted, if applicable (optional).

Manufacturers may provide the data elements required for a New Drug Report concurrent with a New Drug Notification filed no later than 10 days after market introduction.

Carrier Reporting

Carrier reports must be filed with the Division by 11:59PM Eastern Time no later than 60 days after the close of each calendar year. Carrier reporting is required at each of the following levels of data aggregation:

1. Carrier Summary – across all prescription drugs;
2. Drug Group Category – across the top 25 drug groups for each reporting category;

3. Prescription Drug Category – across the top 25 prescription drugs for each reporting category;
4. Drug Group – for each of the top 25 drug groups in each reporting category; and
5. Prescription Drug – for each of the top 25 prescription drugs in each reporting category.

Reporting Categories

Reporting categories include:

1. Greatest total spending before enrollee cost sharing in the last calendar year;
2. Greatest total spending per prescription drug user before enrollee cost sharing in the last calendar year;
3. Highest calendar year-over-year increase in total spending before enrollee cost sharing;
4. Highest calendar year-over-year increase in total spending per prescription drug user before enrollee cost sharing;
5. Greatest total enrollee cost sharing in the last calendar year; and
6. Highest calendar year-over-year increase in enrollee cost sharing per prescription drug user.

Carrier Summary Report

A carrier summary report must include the following information aggregated across all prescription drugs for the previous calendar year:

1. Total spending before enrollee cost sharing;
2. Total enrollee cost sharing;
3. Total spending before enrollee cost sharing per prescription drug user;
4. Total enrollee cost sharing per prescription drug user;
5. General comments and/or additional information related to the data submitted, if applicable (optional); and
6. Any documentation to support the data submitted, if applicable (optional).

Carrier Drug Group Category Report

A carrier drug group category report must include the following information aggregated across the top 25 drug groups for each reporting category for the previous calendar year:

1. Reporting category;
2. Total spending before enrollee cost sharing;
3. Total enrollee cost sharing;
4. Total spending before enrollee cost sharing per prescription drug user;

5. Total enrollee cost sharing per prescription drug user;
6. General comments and/or additional information related to the data submitted, if applicable (optional); and
7. Any documentation to support the data submitted, if applicable (optional).

Carrier Prescription Drug Category Report

A carrier prescription drug category report must include the following information aggregated across the top 25 prescription drugs for each reporting category for the previous calendar year:

1. Reporting category;
2. Total spending before enrollee cost sharing;
3. Total enrollee cost sharing;
4. Total spending before enrollee cost sharing per prescription drug user;
5. Total enrollee cost sharing per prescription drug user;
6. General comments and/or additional information related to the data submitted, if applicable (optional); and
7. Any documentation to support the data submitted, if applicable (optional).

Carrier Drug Group Report

A carrier drug group report must include the following information for each of the top 25 drug groups for each reporting category for the previous calendar year:

1. Reporting category;
2. Description of the drug group to include the generic drug description or nontrade name;
3. Total count of prescriptions filled;
4. Total spending before enrollee cost sharing;
5. Total enrollee cost sharing;
6. Total spending before enrollee cost sharing per prescription drug user;
7. Total enrollee cost sharing per prescription drug user;
8. Total value of payments made to a PBM that was not paid to a dispensing pharmacy;
9. Total value of payments made to a PSAO that was not paid to a dispensing pharmacy;
10. Total value of prescription drug rebates remitted by or on behalf of a pharmaceutical manufacturer, directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier;
11. Total value of any other retail discounts, price concessions, and fees (including direct and indirect remuneration fees) remitted directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier;

12. General comments and/or additional information related to the data submitted, if applicable (optional); and
13. Any documentation to support the data submitted, if applicable (optional).

Carrier Prescription Drug Report

A carrier prescription drug report must include the following information for each of the top 25 prescription drugs for each reporting category for the previous calendar year:

1. Reporting category;
2. The NDC of the prescription drug;
3. Description of the prescription drug to include the following:
 - a. Product name;
 - b. Dosage form;
 - c. Strength; and
 - d. Package size;
4. Total count of prescriptions filled;
5. Total pricing units dispensed or administered;
6. Total spending before enrollee cost sharing;
7. Total enrollee cost sharing;
8. Total spending before enrollee cost sharing per prescription drug user;
9. Total enrollee cost sharing per prescription drug user;
10. Total value of payments made to a PBM that was not paid to a dispensing pharmacy;
11. Total value of payments made to a PSAO that was not paid to a dispensing pharmacy;
12. Total value of prescription drug rebates remitted by or on behalf of a pharmaceutical manufacturer, directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier;
13. Total value of any other retail discounts, price concessions, and fees (including direct and indirect remuneration fees) remitted directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier;
14. General comments and/or additional information related to the data submitted, if applicable (optional); and
15. Any documentation to support the data submitted, if applicable (optional).

Pharmacy Benefits Manager Reporting

PBM reports must be filed with the Division by 11:59PM Eastern Time no later than 60 days after the Division notifies the PBM of the specific drugs and drug groups for which annual

reporting is required. PBM reporting is required at both of the following levels of data aggregation:

1. Drug Group – for each of the drug groups specified in the notification to report; and
2. Prescription Drug – for each of the prescription drugs specified in the notification to report.

PBM Drug Group Report

A PBM drug group report must include the following information as related to the PBM's administration of prescription drug claims for New Jersey residents during the previous calendar year across all prescription drugs for each drug group specified in the notification to report:

1. Description of the drug group to include the generic drug description or nontrade name;
2. Minimum WAC per pricing unit;
3. Maximum WAC per pricing unit;
4. Total count of prescriptions filled for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
5. Total number of pricing units dispensed or administered for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
6. Total reimbursement and administrative fee amount accrued and receivable from payers for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
7. Total reimbursement amount accrued and receivable from payers for each of:
 - a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;

- d. Any other fees;
8. Total reimbursement amount accrued and payable to pharmacies for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
 9. Total reimbursement amount accrued and payable to pharmacies for each of:
 - a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
 10. Total reimbursement amount accrued and payable to prescription drug networks for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
 11. Total reimbursement amount accrued and payable to prescription drug networks for each of:
 - a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
 12. Total reimbursement amount accrued and payable to pharmacy services administrative organizations for each of the following payer types:
 - a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
 13. Total reimbursement amount accrued and payable to pharmacy services administrative organizations for each of:
 - a. Ingredient cost;

- b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
14. Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from each of:
- a. Prescription drug manufacturers;
 - b. Pharmacies;
 - c. Prescription drug networks;
 - d. Pharmacy services administrative organizations;
15. Percentage of the total receivable amount accrued by the PBM for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) that were, or will be, retained by the PBM;
16. Total net income accrued;
17. General comments and/or additional information related to the data submitted, if applicable (optional); and
18. Any documentation to support the data submitted, if applicable (optional).

Where a PBM has not administered prescription drug claims for New Jersey residents during the previous calendar year for any prescription drug in a drug group specified in the notification to report, the PBM should provide zero values for all related data fields.

PBM Prescription Drug Report

A PBM prescription drug report must include the following information as related to the PBM's administration of prescription drug claims for New Jersey residents during the previous calendar year for each prescription drug specified in the notification to report:

1. The NDC of the prescription drug;
2. Description of the prescription drug to include the following:
 - a. Product name;
 - b. Dosage form;
 - c. Strength; and
 - d. Package size;
3. Minimum WAC per pricing unit;
4. Maximum WAC per pricing unit;
5. Total count of prescriptions filled for each of the following payer types:
 - a. Medicare;

- b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
6. Total number of pricing units dispensed or administered for each of the following payer types:
- a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
7. Total reimbursement and administrative fee amount accrued and receivable from payers for each of the following payer types:
- a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
8. Total reimbursement amount accrued and receivable from payers for each of:
- a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
9. Total reimbursement amount accrued and payable to pharmacies for each of the following payer types:
- a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
10. Total reimbursement amount accrued and payable to pharmacies for each of:
- a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
11. Total reimbursement amount accrued and payable to prescription drug networks for each of the following payer types:

- a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other
12. Total reimbursement amount accrued and payable to prescription drug networks for each of:
- a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
13. Total reimbursement amount accrued and payable to pharmacy services administrative organizations for each of the following payer types:
- a. Medicare;
 - b. NJ FamilyCare / Medicaid;
 - c. Commercial;
 - d. Other;
14. Total reimbursement amount accrued and payable to pharmacy services administrative organizations for each of:
- a. Ingredient cost;
 - b. Dispensing fees;
 - c. Administrative fees;
 - d. Any other fees;
15. Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from each of:
- a. Prescription drug manufacturers;
 - b. Pharmacies;
 - c. Prescription drug networks;
 - d. Pharmacy services administrative organizations;
16. Percentage of the total receivable amount accrued by the PBM for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) that were, or will be, retained by the PBM;
17. Total net income accrued;

18. General comments and/or additional information related to the data submitted, if applicable (optional); and
19. Any documentation to support the data submitted, if applicable (optional).

Where a PBM has not administered prescription drug claims for New Jersey residents during the previous calendar year for a prescription drug specified in the notification to report, the PBM should provide zero values for all related data fields.

Wholesaler Reporting

Wholesaler reports must be filed with the Division by 11:59PM Eastern Time no later than 60 days after the Division notifies the wholesaler of the specific drugs and drug groups for which annual reporting is required. Wholesaler reporting is required at both of the following levels of data aggregation:

1. Drug Group – for each of the drug groups specified in the notification to report; and
2. Prescription Drug – for each of the prescription drugs specified in the notification to report.

Wholesaler Drug Group Report

A wholesaler drug group report must include the following information as related to the wholesaler's distribution of all prescription drugs within or into New Jersey during the previous calendar year for each drug group specified in the notification to report:

1. Description of the drug group to include the generic drug description or nontrade name;
2. Minimum WAC per pricing unit;
3. Maximum WAC per pricing unit;
4. Number of prescription drug units acquired;
5. Total spent before rebates to acquire the prescription drug(s);
6. Total amount accrued and receivable for prescription drug rebates, discounts, and price concessions (including chargebacks) from prescription drug manufacturers;
7. Total amount accrued and receivable for distribution fees and administrative fees from each of:
 - a. Prescription drug manufacturers;
 - b. Pharmacies;
 - c. Prescription drug networks;
 - d. Pharmacy services administrative organizations;
8. Number of prescription drug units sold;
9. Total gross revenue from sales from each of:
 - a. Pharmacies;

- b. Prescription drug networks;
 - c. Pharmacy services administrative organizations;
10. Total amount accrued and payable for prescription drug rebates, discounts, and price concessions to each of:
- a. Pharmacies;
 - b. Prescription drug networks;
 - c. Pharmacy services administrative organizations;
11. Total net income accrued;
12. General comments and/or additional information related to the data submitted, if applicable (optional); and
13. Any documentation to support the data submitted, if applicable (optional).

Where a wholesaler has not acquired or sold a prescription drug in a drug group specified in the notification to report for distribution in or into New Jersey during the previous calendar year, the wholesaler should provide zero values for all related data fields.

Wholesaler Prescription Drug Report

A wholesaler prescription drug report must include the following information as related to the wholesaler's distribution of each prescription drug within or into New Jersey during the previous calendar year for each prescription drug specified in the notification to report:

1. The NDC of the prescription drug;
2. Description of the prescription drug to include the following:
 - a. Product name;
 - b. Dosage form;
 - c. Strength; and
 - d. Package size;
3. Minimum WAC per pricing unit;
4. Maximum WAC per pricing unit;
5. Number of prescription drug units acquired;
6. Total spent before rebates to acquire the prescription drug;
7. Total amount accrued and receivable for prescription drug rebates, discounts, and price concessions (including chargebacks) from prescription drug manufacturers;
8. Total amount accrued and receivable for distribution fees and administrative fees from each of:
 - a. Prescription drug manufacturers;

- b. Pharmacies;
 - c. Prescription drug networks;
 - d. Pharmacy services administrative organizations;
9. Number of prescription drug units sold;
 10. Total gross revenue from sales from each of:
 - a. Pharmacies;
 - b. Prescription drug networks;
 - c. Pharmacy services administrative organizations;
 11. Total amount accrued and payable for prescription drug rebates, discounts, and price concessions to each of:
 - a. Pharmacies;
 - b. Prescription drug networks;
 - c. Pharmacy services administrative organizations;
 12. Total net income accrued;
 13. General comments and/or additional information related to the data submitted, if applicable (optional); and
 14. Any documentation to support the data submitted, if applicable (optional).

Where a wholesaler has not acquired or sold a prescription drug specified in the notification to report for distribution in or into New Jersey during the previous calendar year, the wholesaler should provide zero values for all related data fields.

Pharmacy Services Administrative Organization Reporting

PSAO Carrier reports must be filed with the Division by 11:59PM Eastern Time no later than 60 days after the close of each calendar year.

PSAO Report

A PSAO report must include the following information as related to the PSAO's negotiated reimbursement rates and schedules of fees during the previous calendar year:

1. Pharmacy benefits manager name;
2. Pharmacy network name;
3. Formulary type description (e.g. Brand, Generic, Specialty);
4. Tier description (e.g. Retail Commercial, Mail Order Part D, etc.);
5. Negotiated rate component(s) for pharmacy reimbursement from PSAO for each formulary type / tier to include:

- a. Basis (e.g. WAC, AWP, NADAC, Per fill, etc.);
 - b. Modifier (e.g. Mark up, Discount, Fixed fee, etc.);
 - c. Fixed Value Applied (set as zero if not applicable);
 - d. Percentage Applied (set as zero if not applicable);
6. Determination of bas(es) for pharmacy reimbursement from PSAO for each formulary type / tier (e.g. lowest of, highest of, lowest of calculated bases plus all per fill amounts, etc.);
 7. Negotiated rate component(s) for PBM reimbursement to PSAO for each formulary type / tier to include:
 - a. Basis (e.g. WAC, AWP, NADAC, Per fill, etc.);
 - b. Modifier (e.g. Mark up, Discount, Fixed fee, etc.);
 - c. Fixed Value Applied (set as zero if not applicable);
 - d. Percentage Applied (set as zero if not applicable);
 8. Determination of basis for PBM reimbursement to PSAO (e.g. lowest of, highest of, lowest of plus all per fill amounts, etc.);
 9. Schedule of fees charged by the PSAO to pharmacies (attach);
 10. General comments and/or additional information related to the data submitted, if applicable (optional); and
 11. Any documentation to support the data submitted, if applicable (optional).

Method of Submission

Data required under N.J.S.A. 45:14-82.2 et seq. shall be submitted to the Division using the prescription drug data submission portal at <https://www.njconsumeraffairs.gov/dau>. Data must be submitted using one of the following methods:

1. Uploading an Excel (.xlsx) template provided by the Division that includes all required information in the format specified in:
 - a. Appendix A – Manufacturer Price Increase Notification Data Specifications;
 - b. Appendix B – Manufacturer Price Increase Report Data Specifications;
 - c. Appendix C – Manufacturer New Drug Notification Data Specifications;
 - d. Appendix D – Manufacturer New Drug Report Data Specifications;
 - e. Appendix E – Carrier Summary Report Data Specifications;
 - f. Appendix F – Carrier Drug Group Category Report Data Specifications;
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- k. Appendix K – PBM Prescription Drug Report Data Specifications;
- l. Appendix L – Wholesaler Drug Group Report Data Specifications;
- m. Appendix M – Wholesaler Prescription Drug Report Data Specifications; or
- n. Appendix N – PSAO Report Data Specifications.

Blank templates should be downloaded from the data submission portal.

2. Individually entering each required data field directly into the data submission portal.

Additionally, reporting entities have the option of uploading any documentation to support data submitted within the data submission portal.

Appendix A – Manufacturer Price Increase Notification Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
WAC Effective Date	Date	10	Effective date of WAC increase	12/31/2000
WAC After Increase	Decimal	10,2	WAC after the price increase	1000.00
Percent Increase Over Previous WAC	Decimal	10,4	Percentage increase over previous WAC	0.1225

Appendix B – Manufacturer Price Increase Report Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the prescription drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
WAC Effective Date	Date	10	Effective date of WAC increase	12/31/2000
WAC After Increase	Decimal	10,2	WAC after the price increase	1000.00
Percent Increase Over Previous WAC	Decimal	10,4	Percentage increase over previous WAC	0.1225
Units Sold	Integer	19	Number of units of the prescription drug sold by the manufacturer for distribution in the State in the 12-month period prior to the price increase	1000000
Projected Units Sold	Integer	19	Projected number of units of the prescription drug to be sold by the manufacturer for distribution in the State in the 12-month period following the price increase	1000000
Date of Introduction	Date	10	Date of introduction for sale in the State	12/31/2000
WAC at Introduction	Decimal	10,2	WAC on date of introduction for sale in the State	1000.00
Baseline WAC	Decimal	10,2	WAC of the prescription drug product on the later of: a. the date one year prior to the date of the price increase; b. the date of introduction for sale in the State; or c. the acquisition date	1000.00
Gross Revenue from Sales	Decimal	14,2	Gross revenue from sales of the prescription drug for distribution in in the State during the 12-month period prior to the price increase, expressed in U.S. dollars per pricing unit.	1000.00
Projected Gross Revenue from Sales	Decimal	14,2	Projected gross revenue from sales of the prescription drug for distribution in the State during the 12-month period following the price increase, expressed in U.S. dollars per pricing unit.	1000.00
Manufacturing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State incurred to manufacture the prescription drug during the 12-month period prior to the price increase	1000.00
Projected Manufacturing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State projected	1000.00

			to be incurred to manufacture the prescription drug during the 12-month period following the price increase	
Marketing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State incurred to market the prescription drug during the 12-month period prior to the price increase	1000.00
Projected Marketing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State projected to be incurred to market the prescription drug during the 12-month period following the price increase	1000.00
Distributing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State incurred to distribute the prescription drug during the 12-month period prior to the price increase	1000.00
Projected Distributing Cost	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State projected to be incurred to distribute the prescription drug during the 12-month period following the price increase	1000.00
Total Rebate Payable	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State accrued and payable for rebates, chargebacks, and retrospective price concessions during the 12-month period prior to the price increase	1000.00
Projected Total Rebate Payable	Decimal	14,2	Direct costs or reductions in revenue related to sales of the prescription drug for distribution in the State projected to be accrued and payable for rebates, chargebacks, and retrospective price concessions during the 12-month period following the price increase	1000.00
Price Increase Reason	Alphanumeric	8000	The reason(s) that the manufacturer increased the WAC of the prescription drug.	"Price Increase Reason(s)"
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the prescription drug, if applicable	"General Comments"

Appendix C – Manufacturer New Drug Notification Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
Date of Introduction	Date	10	Date of introduction for sale in the State	12/31/2000
WAC at Introduction	Decimal	10,2	WAC on date of introduction for sale in the State	1000.00

Appendix D – Manufacturer New Drug Report Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the prescription drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
Date of Introduction	Date	10	Date of introduction for sale in the State	12/31/2000
WAC at Introduction	Decimal	10,2	WAC on date of introduction for sale in the State	1000.00
Projected Patient Volume (NDC)	Integer	10	Projected patient volume in the State for the prescription drug in the 12-month period following market introduction	1000000
Projected Patient Volume (Drug Group)	Integer	10	Projected patient volume in the State for the drug group (i.e. across all drugs that share a unique generic drug description or nontrade name with the prescription drug introduced for sale in the State) in the 12-month period following market introduction	1000000
Projected Gross Revenue from Sales (NDC)	Decimal	14,2	Projected total gross revenue from sales of the prescription drug in the State during the 12-month period following market introduction	1000.00
Projected Gross Revenue from Sales (Drug Group)	Decimal	14,2	Projected gross revenue from sales of the drug group in the State (i.e. across all drugs that share a unique generic drug description or nontrade name with the prescription drug introduced for sale in the State) during the 12-month period following market introduction	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the prescription drug, if applicable	"General Comments"

Appendix E – Carrier Summary Report Data Specifications

Data Element	Format	Size	Description	Example
Total Spending before Enrollee Cost Sharing	Decimal	14,2	Total spending before enrollee cost sharing aggregated across all prescription drugs during the previous calendar year	1000.00
Total Enrollee Cost Sharing	Decimal	14,2	Total enrollee cost sharing aggregated across all prescription drugs during the previous calendar year	1000.00
Average Spending before Enrollee Cost Sharing	Decimal	10,2	Total spending before enrollee cost sharing per prescription drug user aggregated across all prescription drugs during the previous calendar year	1000.00
Average Enrollee Cost Sharing	Decimal	10,2	Total enrollee cost sharing per prescription drug user aggregated across all prescription drugs during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the carrier summary, if applicable	"General Comments"

Appendix F – Carrier Drug Group Category Report Data Specifications

Data Element	Format	Size	Description	Example
Reporting Category	Integer	1	Enter Integer Value: 1 - Greatest total spending before enrollee cost sharing in the last calendar year 2 - Greatest total spending per prescription drug user before enrollee cost sharing in the last calendar year 3 - Highest calendar year-over-year increase in total spending before enrollee cost sharing 4 - Highest calendar year-over-year increase in total spending per prescription drug user before enrollee cost sharing 5 - Greatest total enrollee cost sharing in the last calendar year 6 - Highest calendar year-over-year increase in enrollee cost sharing per prescription drug user	1
Total Spending before Enrollee Cost Sharing	Decimal	14,2	Total spending before enrollee cost sharing aggregated across the top 25 drug groups in the reporting category during the previous calendar year	1000.00
Total Enrollee Cost Sharing	Decimal	14,2	Total enrollee cost sharing aggregated across the top 25 drug groups in the reporting category during the previous calendar year	1000.00
Average Spending before Enrollee Cost Sharing	Decimal	10,2	Total spending before enrollee cost sharing per prescription drug user aggregated across the top 25 drug groups in the reporting category during the previous calendar year	1000.00
Average Enrollee Cost Sharing	Decimal	10,2	Total enrollee cost sharing per prescription drug user aggregated across the top 25 drug groups in the reporting category during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the reporting category, if applicable	"General Comments"

Appendix G – Carrier Prescription Drug Category Report Data Specifications

Data Element	Format	Size	Description	Example
Reporting Category	Integer	1	Enter Integer Value: 1 - Greatest total spending before enrollee cost sharing in the last calendar year 2 - Greatest total spending per prescription drug user before enrollee cost sharing in the last calendar year 3 - Highest calendar year-over-year increase in total spending before enrollee cost sharing 4 - Highest calendar year-over-year increase in total spending per prescription drug user before enrollee cost sharing 5 - Greatest total enrollee cost sharing in the last calendar year 6 - Highest calendar year-over-year increase in enrollee cost sharing per prescription drug user	1
Total Spending before Enrollee Cost Sharing	Decimal	14,2	Total Spending before enrollee cost sharing aggregated across the top 25 prescription drugs in the reporting category during the previous calendar year	1000.00
Total Enrollee Cost Sharing	Decimal	14,2	Total enrollee cost sharing aggregated across the top 25 prescription drugs in the reporting category during the previous calendar year	1000.00
Average Spending before Enrollee Cost Sharing	Decimal	10,2	Total spending before enrollee cost sharing per prescription drug user aggregated across top 25 prescription drugs in the reporting category during the previous calendar year	1000.00
Average Enrollee Cost Sharing	Decimal	10,2	Total enrollee cost sharing per prescription drug user aggregated across the top 25 prescription drugs in the reporting category during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the reporting category, if applicable	"General Comments"

Appendix H – Carrier Drug Group Report Data Specifications

Data Element	Format	Size	Description	Example
Reporting Category	Integer	1	Enter Integer Value: 1 - Greatest total spending before enrollee cost sharing in the last calendar year 2 - Greatest total spending per prescription drug user before enrollee cost sharing in the last calendar year 3 - Highest calendar year-over-year increase in total spending before enrollee cost sharing 4 - Highest calendar year-over-year increase in total spending per prescription drug user before enrollee cost sharing 5 - Greatest total enrollee cost sharing in the last calendar year 6 - Highest calendar year-over-year increase in enrollee cost sharing per prescription drug user	1
Drug Group	Alphanumeric	255	Description of the drug group including the generic drug description or nontrade name	"Drug X"
Prescriptions Filled	Integer	10	Total count of prescriptions filled for the drug group during the previous calendar year	1000000
Total Spending before Enrollee Cost Sharing	Decimal	14,2	Total spending before enrollee cost sharing for the drug group during the previous calendar year	1000.00
Total Enrollee Cost Sharing	Decimal	14,2	Total enrollee cost sharing for the drug group during the previous calendar year	1000.00
Average Spending before Enrollee Cost Sharing	Decimal	10,2	Total spending before enrollee cost sharing per prescription drug user for the drug group during the previous calendar year	1000.00
Average Enrollee Cost Sharing	Decimal	10,2	Total enrollee cost sharing per prescription drug user for the drug group during the previous calendar year	1000.00
PBM Margin and Fees	Decimal	14,2	Total value of payments made to a PBM that was not paid to a dispensing pharmacy for the drug group during the previous calendar year	1000.00
PSAO Margin and Fees	Decimal	14,2	Total value of payments made to a PSAO that was not paid to a dispensing pharmacy for the drug group during the previous calendar year	1000.00

Total Rebates Received	Decimal	14,2	Total value of prescription drug rebates remitted by or on behalf of a pharmaceutical manufacturer, directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier for the drug group during the previous calendar year	1000.00
Total Other Discounts and Fees Received	Decimal	14,2	Total value of any other retail discounts, price concessions, and fees (including direct and indirect remuneration fees) remitted directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier for the drug group during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the drug group, if applicable	"General Comments"

Appendix I – Carrier Prescription Drug Report Data Specifications

Data Element	Format	Size	Description	Example
Reporting Category	Integer	1	Enter Integer Value: 1 - Greatest total spending before enrollee cost sharing in the last calendar year 2 - Greatest total spending per prescription drug user before enrollee cost sharing in the last calendar year 3 - Highest calendar year-over-year increase in total spending before enrollee cost sharing 4 - Highest calendar year-over-year increase in total spending per prescription drug user before enrollee cost sharing 5 - Greatest total enrollee cost sharing in the last calendar year 6 - Highest calendar year-over-year increase in enrollee cost sharing per prescription drug user	1
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the prescription drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
Prescriptions Filled	Integer	10	Total count of prescriptions filled for the prescription drug during the previous calendar year	1000000
Pricing Units Dispensed / Administered	Integer	19	Total pricing units dispensed or administered for the prescription drug during the previous calendar year	1000000
Total Spending before Enrollee Cost Sharing	Decimal	14,2	Total spending before enrollee cost sharing for the prescription drug during the previous calendar year	1000.00
Total Enrollee Cost Sharing	Decimal	14,2	Total enrollee cost sharing for the prescription drug during the previous calendar year	1000.00
Average Spending before Enrollee Cost Sharing	Decimal	10,2	Total spending before enrollee cost sharing per prescription drug user for the prescription drug during the previous calendar year	1000.00
Average Enrollee Cost Sharing	Decimal	10,2	Total enrollee cost sharing per prescription drug user for the prescription drug during the previous calendar year	1000.00
PBM Margin and Fees	Decimal	14,2	Total value of payments made to a PBM that was not paid to a dispensing pharmacy for the prescription drug during the previous calendar year	1000.00
PSAO Margin and Fees	Decimal	14,2	Total value of payments made to a PSAO that was not paid to a dispensing pharmacy for the prescription drug during the previous calendar year	1000.00

Total Rebates Received	Decimal	14,2	Total value of prescription drug rebates remitted by or on behalf of a pharmaceutical manufacturer, directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier for the prescription drug during the previous calendar year	1000.00
Total Other Discounts and Fees Received	Decimal	14,2	Total value of any other retail discounts, price concessions, and fees (including direct and indirect remuneration fees) remitted directly or indirectly, to the carrier, or to a PBM or PSAO under contract with the carrier for the prescription drug during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the prescription drug, if applicable	"General Comments"

Appendix J – PBM Drug Group Report Data Specifications

Data Element	Format	Size	Description	Example
Drug Group	Alphanumeric	255	Description of the drug group including the generic drug description or nontrade name	"Drug X"
Minimum WAC per Pricing Unit	Decimal	10,2	Minimum WAC per pricing unit across all prescription drugs in the drug group during the previous calendar year	1000.00
Maximum WAC per Pricing Unit	Decimal	10,2	Maximum WAC per pricing unit across all prescription drugs in the drug group during the previous calendar year	1000.00
Prescriptions Filled – Medicare	Integer	10	Total count of prescriptions filled for Medicare claims for New Jersey residents for the drug group during the previous calendar year	1000000
Prescriptions Filled – NJ FamilyCare / Medicaid	Integer	10	Total count of prescriptions filled for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000000
Prescriptions Filled – Commercial	Integer	10	Total count of prescriptions filled for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000000
Prescriptions Filled - Other	Integer	10	Total count of prescriptions filled for other claims for New Jersey residents for the drug group during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Medicare	Integer	19	Total number of pricing units dispensed or administered for Medicare claims for New Jersey residents for the drug group during the previous calendar year	1000000
Pricing Units Dispensed / Administered – NJ FamilyCare / Medicaid	Integer	19	Total number of pricing units dispensed or administered for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Commercial	Integer	19	Total number of pricing units dispensed or administered for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Other	Integer	19	Total number of pricing units dispensed or administered for other claims for New Jersey residents for the drug group during the previous calendar year	1000000
Reimbursement / Admin Fee Receivable – Medicare	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for Medicare claims for New Jersey residents for the drug group during the previous calendar year	1000.00

Reimbursement / Admin Fee Receivable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement / Admin Fee Receivable – Commercial Payer	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement / Admin Fee Receivable – Other Payer	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for other claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement Receivable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for ingredient costs for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement Receivable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for dispensing fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement Receivable – Admin Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for administrative fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement Receivable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for any other fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for Medicare claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for other claims for New Jersey residents for the drug group during the previous calendar year	1000.00

Pharmacy Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for ingredient costs for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for dispensing fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for administrative fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for any other fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for Medicare claims for New Jersey residents or the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for other claims for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for ingredient costs for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for dispensing fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for administrative fees for	1000.00

			New Jersey residents for the drug group during the previous calendar year	
Prescription Drug Network Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for any other fees for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for Medicare claims for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for NJ FamilyCare / Medicaid claims for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for commercial claims for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for other claims for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for ingredient costs for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for dispensing fees for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for administrative fees for New Jersey residents for the drug group during the previous calendar year	1000.00
PSAO Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for any other fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Rebates Receivable - Manufacturer	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from manufacturers for New Jersey residents for the drug group during the previous calendar year	1000.00
Rebates Receivable – Pharmacy	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from pharmacies	1000.00

			for New Jersey residents for the drug group during the previous calendar year	
Rebates Receivable – Prescription Drug Network	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from prescription drug networks for New Jersey residents for the drug group during the previous calendar year	1000.00
Rebates Receivable - PSAO	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from PSAOs for New Jersey residents for the drug group during the previous calendar year	1000.00
Percent Rebates Retained	Decimal	5,4	Percentage of the total receivable amount accrued by the PBM for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) for New Jersey residents that were, or will be, retained by the PBM for the drug group during the previous calendar year	0.0125
Total Net Income	Decimal	14,2	Total net income accrued for New Jersey residents for the drug group during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the drug group, if applicable	"General Comments"

Appendix K – PBM Prescription Drug Report Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the prescription drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
Minimum WAC per Pricing Unit	Decimal	10,2	Minimum WAC per Pricing Unit for the prescription drug during the previous calendar year	1000.00
Maximum WAC per Pricing Unit	Decimal	10,2	Maximum WAC per Pricing Unit for the prescription drug during the previous calendar year	1000.00
Prescriptions Filled – Medicare	Integer	10	Total count of prescriptions filled for Medicare claims for the prescription drug during the previous calendar year	1000000
Prescriptions Filled – NJ FamilyCare / Medicaid	Integer	10	Total count of prescriptions filled for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Prescriptions Filled – Commercial	Integer	10	Total count of prescriptions filled for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Prescriptions Filled - Other	Integer	10	Total count of prescriptions filled for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Medicare	Integer	19	Total number of pricing units dispensed or administered for Medicare claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Pricing Units Dispensed / Administered – NJ FamilyCare / Medicaid	Integer	19	Total number of pricing units dispensed or administered for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Commercial	Integer	19	Total number of pricing units dispensed or administered for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Pricing Units Dispensed / Administered – Other	Integer	19	Total number of pricing units dispensed or administered for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000000
Reimbursement / Admin Fee Receivable – Medicare	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for Medicare claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00

Reimbursement / Admin Fee Receivable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Reimbursement / Admin Fee Receivable – Commercial Payer	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Reimbursement / Admin Fee Receivable – Other Payer	Decimal	14,2	Total reimbursement and administrative fee amount accrued and receivable from payers for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Reimbursement Receivable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for ingredient costs for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Reimbursement Receivable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for dispensing fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Reimbursement Receivable – Admin Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for administrative fees for New Jersey residents for the drug group during the previous calendar year	1000.00
Reimbursement Receivable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and receivable from payers for any other fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for Medicare claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00

Pharmacy Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for ingredient costs for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for dispensing fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for administrative fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Pharmacy Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to pharmacies for any other fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for Medicare claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for ingredient costs for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for dispensing fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Prescription Drug Network Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for administrative fees for	1000.00

			New Jersey residents for the prescription drug during the previous calendar year	
Prescription Drug Network Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to prescription drug networks for any other fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Medicare	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for Medicare claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – NJ FamilyCare / Medicaid	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for NJ FamilyCare / Medicaid claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Commercial Payer	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for commercial claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Other Payer	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for other claims for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Ingredient Cost	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for ingredient costs for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Dispensing Fees	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for dispensing fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Admin Fee	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for administrative fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
PSAO Reimbursement Payable – Other Fees	Decimal	14,2	Total reimbursement amount accrued and payable to PSAOs for any other fees for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Rebates Receivable – Manufacturer	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from manufacturers for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Rebates Receivable – Pharmacy	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from pharmacies	1000.00

			for New Jersey residents for the prescription drug during the previous calendar year	
Rebates Receivable – Prescription Drug Network	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from prescription drug networks for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Rebates Receivable – PSAO	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) from PSAOs for New Jersey residents for the prescription drug during the previous calendar year	1000.00
Percent Rebates Retained	Decimal	5,4	Percentage of the total receivable amount accrued by the PBM for prescription drug rebates, discounts, price concessions, and fees (including direct and indirect remuneration fees) for New Jersey residents that were, or will be, retained by the PBM for the prescription drug during the previous calendar year	0.0125
Total Net Income	Decimal	14,2	Total net income accrued for New Jersey residents for the prescription drug during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the prescription drug, if applicable	"General Comments"

Appendix L – Wholesaler Drug Group Report Data Specifications

Data Element	Format	Size	Description	Example
Drug Group	Alphanumeric	255	Description of the drug group including the generic drug description or nontrade name	"Drug X"
Minimum WAC per Pricing Unit	Decimal	10,2	Minimum WAC per pricing unit across all prescription drugs in the drug group during the previous calendar year	1000.00
Maximum WAC per Pricing Unit	Decimal	10,2	Maximum WAC per pricing unit across all prescription drugs in the drug group during the previous calendar year	1000.00
Units Acquired	Integer	19	Total number of prescriptions drug units aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000000
Total Acquisition Amount	Decimal	14,2	Total spent before rebates to acquire prescription drugs aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Rebates Receivable	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, and price concessions (including chargebacks) from manufacturers aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Manufacturer	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from manufacturers aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Pharmacy	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from pharmacies aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Prescription Drug Network	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from prescription drug networks aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00

Distribution / Admin Fee Receivable – PSAO	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from PSAOs aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Units Sold	Integer	19	Total number of prescriptions drug units sold aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000000
Gross Revenue from Sales – Pharmacy	Decimal	14,2	Total gross revenue from sales of prescription drugs in the drug group to pharmacies during the previous calendar year	1000.00
Gross Revenue from Sales – Prescription Drug Network	Decimal	14,2	Total gross revenue from sales of prescription drugs for distribution within or into New Jersey in the drug group to prescription drug networks during the previous calendar year	1000.00
Gross Revenue from Sales – PSAO	Decimal	14,2	Total gross revenue from sales of prescription drugs for distribution within or into New Jersey in the drug group to PSAOs during the previous calendar year	1000.00
Rebates Payable – Pharmacy	Decimal	14,2	Total amount accrued and payable to pharmacies for prescription drug rebates, discounts, and price concessions aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Rebates Payable – Prescription Drug Network	Decimal	14,2	Total amount accrued and payable to prescription drug networks for prescription drug rebates, discounts, and price concessions aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Rebates Payable – Pharmacy	Decimal	14,2	Total amount accrued and payable to PSAOs for prescription drug rebates, discounts, and price concessions aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00
Total Net Income	Decimal	14,2	Total net income accrued aggregated across all prescription drugs for distribution within or into New Jersey in the drug group during the previous calendar year	1000.00

General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the drug group, if applicable	"General Comments"
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Appendix M – Wholesaler Prescription Drug Report Data Specifications

Data Element	Format	Size	Description	Example
NDC	Alphanumeric	11	NDC of the prescription drug	"00000000000"
Drug Description	Alphanumeric	255	Description of the prescription drug including product name, dosage form, strength, package size	"Drug X Tablets 30MG 30"
Minimum WAC per Pricing Unit	Decimal	10,2	Minimum WAC per pricing unit for the prescription drug during the previous calendar year	1000.00
Maximum WAC per Pricing Unit	Decimal	10,2	Maximum WAC per pricing unit for the prescription drug during the previous calendar year	1000.00
Units Acquired	Integer	19	Number of prescriptions drug units acquired of the prescription drug for distribution within or into New Jersey during the previous calendar year	1000000
Total Acquisition Amount	Decimal	14,2	Total spent before rebates to acquire the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Rebates Receivable	Decimal	14,2	Total amount accrued and receivable for prescription drug rebates, discounts, and price concessions (including chargebacks) from manufacturers for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Manufacturer	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from manufacturers for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Pharmacy	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from pharmacies for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – Prescription Drug Network	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from prescription drug networks for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Distribution / Admin Fee Receivable – PSAO	Decimal	14,2	Total amount accrued and receivable for distribution fees and administrative fees from PSAOs for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00

Units Sold	Integer	19	Number of prescriptions drug units sold of the prescription drug for distribution within or into New Jersey during the previous calendar year	1000000
Gross Revenue from Sales – Pharmacy	Decimal	14,2	Total gross revenue from sales of the prescription drug for distribution within or into New Jersey to pharmacies during the previous calendar year	1000.00
Gross Revenue from Sales – Prescription Drug Network	Decimal	14,2	Total gross revenue from sales of the prescription drug for distribution within or into New Jersey to prescription drug networks during the previous calendar year	1000.00
Gross Revenue from Sales – PSAO	Decimal	14,2	Total gross revenue from sales of the prescription drug for distribution within or into New Jersey to PSAOs during the previous calendar year	1000.00
Rebates Payable – Pharmacy	Decimal	14,2	Total amount accrued and payable to pharmacies for prescription drug rebates, discounts, and price concessions aggregated for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Rebates Payable – Prescription Drug Network	Decimal	14,2	Total amount accrued and payable to prescription drug networks for prescription drug rebates, discounts, and price concessions for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Rebates Payable – Pharmacy	Decimal	14,2	Total amount accrued and payable to PSAOs for prescription drug rebates, discounts, and price concessions for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
Total Net Income	Decimal	14,2	Total net income accrued for the prescription drug for distribution within or into New Jersey during the previous calendar year	1000.00
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the prescription drug, if applicable	"General Comments"

Appendix N – PSAO Report Data Specifications

Data Element	Format	Size	Description	Example
PBM Name	Alphanumeric	255	Name of the PBM	"PBM"
Pharmacy Network Name	Alphanumeric	255	Name of the pharmacy network	"Pharmacy Network"
Formulary Type Description	Alphanumeric	255	Formulary type description (e.g. Brand, Generic, Specialty)	"Brand"
Tier Description	Alphanumeric	255	Tier description (e.g. Retail Commercial, Mail Order Part D, etc.)	"Retail Commercial"
Pharmacy Negotiated Rate Component - Basis	Alphanumeric	255	Reference price or transactional component upon which pharmacy reimbursement rate is based (e.g. WAC, AWP, NADAC, Per fill, etc.)	"WAC"
Pharmacy Negotiated Rate Component – Modifier	Alphanumeric	255	Type of calculation or fixed amount applied to the basis component to determine pharmacy reimbursement rate (e.g. Mark up, Discount, Fixed fee, etc.)	"Mark up"
Pharmacy Negotiated Rate Component – Fixed Value Applied	Decimal	10,2	Specific value applied to the basis component to determine pharmacy reimbursement rate when the basis modifier is a predetermined value for all transactions (set as zero if not applicable)	1000.00
Pharmacy Negotiated Rate Component – Percentage Applied	Decimal	5,4	Percentage value applied to the basis component to determine pharmacy reimbursement rate when the basis modifier is a mark up or discount from the basis value (set as zero if not applicable)	0.125
Determination of Pharmacy Reimbursement	Alphanumeric	5000	Description of calculation used to determine pharmacy reimbursement for a given transaction across all basis calculations in a formulary tier (e.g. lowest of, highest of, lowest of plus all per fill amounts, etc.)	"Lowest value"
PBM Negotiated Rate Component - Basis	Alphanumeric	255	Reference price or transactional component upon which PSAO reimbursement rate from PBM is based (e.g. WAC, AWP, NADAC, Per fill, etc.)	"WAC"
PBM Negotiated Rate Component – Modifier	Alphanumeric	255	Type of calculation or fixed amount applied to the basis component to determine PSAO reimbursement rate from PBM (e.g. Mark up, Discount, Fixed fee, etc.)	"Mark up"
PBM Negotiated Rate Component – Fixed Value Applied	Decimal	10,2	Specific value applied to the basis component to determine PSAO reimbursement rate from PBM when the basis modifier is a predetermined value for all transactions (set as zero if not applicable)	1000.00

PBM Negotiated Rate Component – Percentage Applied	Decimal	5,4	Percentage value applied to the basis component to determine PSAO reimbursement rate from PBM when the basis modifier is a mark up or discount from the basis value (set as zero if not applicable)	0.125
Determination of PBM Reimbursement to PSAO	Alphanumeric	5000	Description of calculation used to determine PSAO reimbursement rate from PBM for a given transaction across all basis calculations in a formulary tier (e.g. lowest of, highest of, lowest of plus all per fill amounts, etc.)	"Lowest value"
General Comments	Alphanumeric	8000	General comments and/or additional information related to the data submitted for the negotiated rate component, if applicable	"General Comments"