



West Virginia Offices of the Insurance Commissioner

Table with columns: Product NDC Number, Product Name, Fill Date, Quantity of the Drug Dispensed, Pharmacy Name, Pharmacy Provider ID, Amount the Pharmacy was Reimbursed, Amount of Dispensing Fee, Amount of Member Cost Share, Average NADAC, Average NADAC Report Date, 10% and Below Actual Percentage of Reimbursement, 10% and Above Actual Percentage of NADAC, Affiliate Pharmacy (Yes / No), Dispensed Pursuant to Federal, State or Local Government.





