

Attachment 11

Part 3.F.9 Reporting, Financial reconciliation data set (net PMPM cost guarantees and rebate validation)

The Contractor shall provide to PEBA and/or its designated representative within thirty (30) calendar days after the end of the performance period any reconciliation datasets it has created for the purpose of reconciling rebate payments with PEBA. The final reconciliation dataset used for the net PMPM cost guarantees must be received within one hundred-eighty (180) days after the end of each Plan year. The PBM's internal reconciliation dataset shall contain at a minimum all fields used by the PBM for reconciliation purposes and must include both the NDC-11 code and claim ID as a logical link to the detailed claims transaction file as described in Part 3.F.7, Reporting. The detailed claims transaction file as described in Part 3.F.7, Reporting, shall be the financial system of record. Commercial Plan rebate payments should be delineated by SHP and MUSC Health Plan. The data set for financial reconciliation purposes should include at a minimum:

- a. Carrier (Commercial/EGWP);
- b. Claim ID (must match the original claim ID from the detailed claims transaction file described in Part 3.F.7, Reporting);
- c. NDC-11 code
- d. Drug name
- e. Days supply;
- f. Dispense date;
- g. Included/excluded indicator (drug is included as defined in Part 3.A.6, Pricing and Cost Containment Requirements);
- h. Excluded reason (description for which exclusion as defined in Part 3.A.6, Pricing and Cost Containment Requirements, applies);
- i. Rx Count (positive or negative numeric value for original/reversal);
- j. Reversal indicator;
- k. Rebate amount; and
- l. Date rebate received by Contractor or its subcontractor.