



Hewlett Packard
Enterprise

AMMIS Drug Rebate User Manual- Part II

Date Modified: 05/11/2016

Alabama Medicaid Agency
501 Dexter Avenue
Montgomery, Alabama 36104

Hewlett Packard Enterprise
301 Technacenter Drive
Montgomery, Alabama 36117

Table of Contents

6.	Document Control.....	1
6.1	Document Information Page	1
6.2	Amendment History	1
6.3	Related documentation	1
7.	Reports.....	3
7.1	RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report	4
7.1.1	RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Narrative.....	4
7.1.2	RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Layout.....	4
7.1.3	RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Field Descriptions	4
7.2	RBT-2000-Q -- Drug Rebate Original Invoices Report.....	6
7.2.1	RBT-2000-Q -- Drug Rebate Original Invoices Report Narrative	6
7.2.2	RBT-2000-Q -- Drug Rebate Original Invoices Report Layout.....	6
7.2.3	RBT-2000-Q -- Drug Rebate Original Invoices Field Descriptions	6
7.3	RBT-2000-Q -- Drug Rebate Adjustment Invoice Report	9
7.3.1	RBT-2000-Q -- Drug Rebate Adjustment Invoice Report Narrative	9
7.3.2	RBT-2000-Q -- Drug Rebate Adjustment Invoice Layout.....	9
7.3.3	RBT-2000-Q -- Drug Rebate Adjustment Invoice Field Descriptions.....	9
7.4	RBT-2002-Q -- Drug Rebate Invoice Summary Report	11
7.4.1	RBT-2002-Q -- Drug Rebate Invoice Summary Report Narrative.....	11
7.4.2	RBT-2002-Q -- Drug Rebate Invoice Summary Layout	11
7.4.3	RBT-2002-Q -- Drug Rebate Invoice Summary Field Descriptions.....	12
7.5	RBT-2002-S -- Drug Rebate Invoice Summary Report.....	13
7.5.1	RBT-2002-S -- Drug Rebate Invoice Summary Report Narrative	13
7.5.2	RBT-2002-S -- Drug Rebate Invoice Summary Report Layout.....	14
7.5.3	RBT-2002-S -- Drug Rebate Invoice Summary Report Field Descriptions.....	15
7.6	RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report.....	16
7.6.1	RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Narrative	16
7.6.2	RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Layout	16
7.6.3	RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Field Descriptions	18
7.7	RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report.....	19
7.7.1	RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Narrative.....	19
7.7.2	RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Layout	19
7.7.3	RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Field Descriptions	20
7.8	RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report	21
7.8.1	RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report Narrative.....	21
7.8.2	RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Layout.....	22
7.8.3	RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report Field Descriptions	23
7.9	RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report.....	24

7.9.1	RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report Narrative	24
7.9.2	RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report Layout	24
7.9.3	RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Field Descriptions	24
7.10	RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report.....	26
7.10.1	RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Narrative.....	26
7.10.2	RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Layout	26
7.10.3	RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Field Descriptions	26
7.11	RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report	28
7.11.1	RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Narrative.....	28
7.11.2	RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Layout	28
7.11.3	RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Field Descriptions	28
7.12	RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report	29
7.12.1	RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Narrative	29
7.12.2	RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Layout	29
7.12.3	RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Field Descriptions	29
7.13	RBT-2011-Q -- Drug Rebate Invoice Summary Activity Report	30
7.13.1	RBT-2011-Q -- Drug Rebate Invoice Summary Activity Report Narrative	30
7.13.2	RBT-2011-Q -- Drug Rebate Invoice Summary Activity Layout	30
7.13.3	RBT-2011-Q -- Drug Rebate Invoice Summary Activity Field Descriptions	30
7.14	RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report.....	32
7.14.1	RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Narrative.....	32
7.14.2	RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Layout.....	32
7.14.3	RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Field Descriptions	32
7.15	RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Report	35
7.15.1	RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Report Narrative	35
7.15.2	RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Layout.....	35
7.15.3	RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Field Descriptions.....	35
7.16	RBT-2014-Q -- Drug Rebate Address Update Report.....	37
7.16.1	RBT-2014-Q -- Drug Rebate Address Update Report Narrative	37
7.16.2	RBT-2014-Q -- Drug Rebate Address Update Report Layout.....	37
7.16.3	RBT-2014-Q -- Drug Rebate Address Update Report Field Descriptions.....	37
7.17	RBT-2015-R -- Drug Rebate Participation by Labeler Code Report	39
7.17.1	RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Narrative.....	39
7.17.2	RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Layout	39
7.17.3	RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Field Descriptions	40
7.18	RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report.....	41
7.18.1	RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Narrative.....	41
7.18.2	RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Layout	41
7.18.3	RBT-2012-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Field Descriptions	41
7.19	RBT-3000-M -- Accounts Receivable - By Labeler Report.....	42
7.19.1	RBT-3000-M -- Accounts Receivable - By Labeler Report Narrative	42
7.19.2	RBT-3000-M -- Accounts Receivable - By Labeler Report Layout.....	42

7.19.3 RBT-3000-M -- Drug Rebate Accounts Receivable - By Labeler Report Field Descriptions
43

7.20 RBT-3001-M -- Accounts Receivable - By Invoice Period Report.....45

7.20.1 RBT-3001-M -- Accounts Receivable – By Invoice Period Report Narrative45

7.20.2 RBT-3001-M -- Accounts Receivable - By Invoice Period Report Layout45

7.20.3 RBT-3001-M -- Drug Rebate Accounts Receivable - By Period Report Field Descriptions46

7.21 RBT-3002-D -- Drug Rebate Cash Exception Report48

7.21.1 RBT-3002-D -- Drug Rebate Cash Exception Report Narrative.....48

7.21.2 RBT-3002-D -- Drug Rebate Cash Exception Report Layout48

7.21.3 RBT-3002-D -- Drug Rebate Cash Exception Report Field Descriptions48

7.22 RBT-3003-M -- Drug Rebate Credit Due – Federal Report50

7.22.1 RBT-3003-M -- Drug Rebate Credit Due – Federal Report Narrative.....50

7.22.2 RBT-3003-M -- Drug Rebate Credit Due – Federal Report Layout50

7.22.3 RBT-3003-M -- Drug Rebate Labeler Credit Due – Federal Report Field Descriptions50

7.23 RBT-3004-D – Drug Rebate Invoice Disposition Exception – Federal Report.....52

7.23.1 RBT-3004-D -- Drug Rebate Invoice Disposition Exception – Federal Report Narrative...52

7.23.2 RBT-3004-D -- Drug Rebate Invoice Disposition Exception – Federal Report Layout52

7.23.3 RBT-3004-D -- Invoice Disposition Exception Report – Federal Field Descriptions52

7.24 RBT-3005-Q -- Labelers W/ Highest Dispute Amounts – Federal Report54

7.24.1 RBT-3005-Q -- Labelers W/ Highest Dispute Amounts - Federal Report Narrative54

7.24.2 RBT-3005-Q -- Labelers with W/ Dispute Amounts - Federal Report Layout54

7.24.3 RBT-3005-Q -- Drug Rebate Labelers W/ Highest Dispute Amounts - Federal Report Field
Descriptions54

7.25 RBT-3007-M -- Drug Rebate Delinquent Payments Report.....56

7.25.1 RBT-3007-M -- Drug Rebate Delinquent Payments Report Narrative56

7.25.2 RBT-3007-M -- Drug Rebate Delinquent Payments Report Layout56

7.25.3 RBT-3007-M -- Drug Rebate Delinquent Payments Report Field Descriptions57

7.26 RBT-3500-M -- Drug Rebate Payments Received Report58

7.26.1 RBT-3500-M -- Drug Rebate Payments Received Report Narrative.....58

7.26.2 RBT-3500-M -- Drug Rebate Payments Received Report Layout.....58

7.26.3 RBT-3500-M -- Drug Rebate Payments Received Report Field Descriptions.....59

7.27 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report60

7.27.1 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Narrative60

7.27.2 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Layout60

7.27.3 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Field
Descriptions60

7.28 RBT-4000-M -- Drug Rebate Dispute Summary - Federal Report62

7.28.1 RBT-4000-M -- Drug Rebate Dispute Summary Report - Federal Narrative62

7.28.2 RBT-4000-M -- Drug Rebate Dispute Summary Report - Federal Layout62

7.28.3 RBT-4000-M -- Drug Rebate Dispute Summary by Invoice Period Report - Federal Field
Descriptions62

7.29 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report .64

7.29.1 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report
Narrative64

7.29.2 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report Layout	64
7.29.3 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed and Adjusted and Collected) Report Field Descriptions	65
7.30 RBT-4002-Q -- Drug Rebate Aging Report	66
7.30.1 RBT-4002-Q -- Drug Rebate Aging Report Narrative	66
7.30.2 RBT-4002-Q -- Drug Rebate Aging Report Layout	66
7.30.3 RBT-4002-Q -- Drug Rebate Aging Report Field Descriptions	67
7.31 RBT-5000-R -- Drug Rebate Resolution Statement Report	68
7.31.1 RBT-5000-R -- Drug Rebate Resolution Statement Report Narrative	68
7.31.2 RBT-5000-R -- Drug Rebate Resolution Statement Report Layout	69
7.31.3 RBT-5000-R -- Drug Rebate Resolution Statement Report Field Descriptions	70
7.32 RBT-5003-W -- Drug Rebate Recoupment Detail Report	72
7.32.1 RBT-5003-W -- Drug Rebate Recoupment Detail Report Narrative	72
7.32.2 RBT-5003-W -- Drug Rebate Recoupment Detail Report Layout	72
7.32.3 RBT-5003-W -- Drug Rebate Recoupment Detail Report Field Descriptions	73
7.33 RBT-5004-Q -- Drug Rebate Recoupment Summary Report	74
7.33.1 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Narrative	74
7.33.2 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Layout	74
7.33.3 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Field Descriptions	74
7.34 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Report	76
7.34.1 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Narrative	76
7.34.2 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Report Layout	76
7.34.3 RBT-5006-W -- Drug Rebate Recoup Letters Greater Than 30 Days Old Report Field Descriptions	77
7.35 RBT-9001-M -- Drug Rebate Outstanding Balance Summary - Federal Report	78
7.35.1 RBT-9001-M -- Drug Rebate Outstanding Balance Summary- Federal Report Narrative	78
7.35.2 RBT-9001-M -- Drug Rebate Outstanding Balance Summary - Federal Report Layout	79
7.35.3 RBT-9001-M -- Drug Rebate Outstanding Balance Letter and Summary - Federal Report Field Descriptions	80

6. Document Control

The latest version of this document is stored electronically. Any printed copy has to be considered an uncontrolled copy.

6.1 Document Information Page

Required Information	Definition
Document Title	AMMIS Drug Rebate User Manual – Part II
Version:	4.0
Location:	https://pwb.alix.slg.eds.com/ALXIX/Subsystem/utills/DocDescription.asp?Folder=../Business%20Design/UserManuals/DrugRebate_UM
Owner:	HPE/Agency
Author:	
Approved by:	
Approval Date:	12/12/2011 (HIPAA 5010 #4)

6.2 Amendment History

The following Amendment History log contains a record of changes made to this document:

Date	Document Version	Author	Reason for the Change	Changes (Section, Page(s) and Text Revised)
11/08/2011	1.1		Application of EIP 5010 changes.	CO 8868 RBT-3500-M -- Drug Rebate Payments Received Report – update layout and field descriptions (7.25.2, 7.25.3)
12/12/2011	2.0		Agency approved	
09/24/2012	3.0		Application of change orders moved to Production	CO 9689: Update 7.2 – RBT-2000-Q Drug Rebate Original Invoices Report (7.2.2, 7.2.3) Update 7.3 – RBT-2000-Q Drug Rebate Adjustment Invoice Report (7.3.2, 7.3.3)
05/11/2016	4.0		Application of CO 12703	Add report 6.18 RBT-2012-Q Drug Rebate CMSFDB File Update Pharmacy report.

6.3 Related documentation

Document	Description	url
Global Glossary and Acronyms	This document provides the user with a listing of commonly used terms and	https://pwb.alix.slg.eds.com/alix/help/20100825%20Combined%20Acrony

Document	Description	url
	acronyms related to the Title XIX program for Alabama.	ms.htm

7. Reports

The Drug Rebate User Manual provides the following information for each report:

Narrative: Provides a brief description of the report functionality and usage.

Layout: Provides a representation of the report and details the exact placement and format of the field names, frequency, values and heading information.

Field Descriptions: Lists the fields included on the report, with a definition of each field.

7.1 RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report

7.1.1 RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Narrative

The Drug Rebate Excluded Provider Listing report identifies Public Health Service (PHS) /Indian Health Service (IHS) providers that need to be excluded from the invoicing process as a result of the Veterans Act of 1992. This report is produced quarterly and can be emailed, printed or routed to FEITH.

7.1.2 RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Layout

Report : RBT-1001-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJR310	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: DRBT0310	DRUG REBATE EXCLUDED PROVIDER LISTING	Page: 999,999
	INVOICE QUARTER: 9/9999	

PHS ENTITY TYPE	PHS ENTITY NAME	PROVIDER NUMBER
XXXXXXXXXX	XX	XXX XXXXXXXXXXXXXXXXXX
XXXXXXXXXX	XX	XXX XXXXXXXXXXXXXXXXXX
XXXXXXXXXX	XX	XXX XXXXXXXXXXXXXXXXXX

TOTAL NUMBER OF PHS PROVIDERS:99,999

* END OF REPORT **

7.1.3 RBT-1001-Q -- Drug Rebate Excluded Provider Listing Report Field Descriptions

Field	Description	Length	Data Type
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	6	Date (Q/CCYY)
PHS Entity Name	Name of the Public Health Service and Indian Health Service (IHS) providers.	41	Character
PHS Entity Type	Entity type of the Public Health Service and Indian Health Service (IHS) providers.	9	Character
Provider Number	Unique number that has been assigned to each Public Health Service and Indian Health Service (IHS) providers.	19	Character

Field	Description	Length	Data Type
Total Number of PHS Providers	Total number of Public Health Service and Indian Health Service (IHS) providers to be excluded from this invoicing process this quarter.	6	Number (Decimal)

Field	Description	Length	Data Type
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
Grand Totals	Displays the totals for the following columns: 'Total Units Reimbursed', 'Total Rebate Amount Claimed', 'Number of Scripts' and 'Total Prov Reimbursement' for the specified quarter	13	Number (Decimal)
Invoice Number	Displays the first five digits of the invoice number which represents the labeler code, and the last 5 digits that represent the year and quarter.	10	Number (Integer)
Invoice Quarter	Displays the quarter and the year reported.	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Number (Integer)
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
NDC Number	Unique National Drug Code (NDC) that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code and the 2-digit package size code.	11	Number (Integer)
Number of Scripts	Displays the total number of prescriptions filled for a National Drug Code (NDC) for the specified quarter. This field is informational only and is not used in calculating the rebate amount.	8	Number (Decimal)
Rebate Amount Per Unit	The rebate amount per unit reported to Centers for Medicare and Medicaid Services (CMS) by the labeler and provided to each state. This amount will appear as zero when the National Drug Code (NDC) amount is reported on the CMS quarterly rate tape. If there is not a record on the quarterly rate tape for an NDC that has had utilization, it will report as a zero in this field as well.	11	Number (Decimal)
Rebate Due From Labeler	Sum of the 'Total Rebate Amount Claimed' field due from the labeler for the specified quarter	12	Number (Decimal)

Field	Description	Length	Data Type
Record ID	This field displays the Record ID of the invoice. Currently, the only value allowed in this field is FFSU.	4	Character
State Code	State abbreviation to indicate which state Health Coverage Program is billing the labeler.	2	Character
Total Number of NDCs Invoiced	Displays the total of all National Drug Codes (NDC) for the specified quarter.	8	Number (Decimal)
Total Provider Reimbursement	Total state Health Coverage Programs dollars paid for a National Drug Code (NDC), including dispensing fees, but excluding co-payment amounts and Third Party Liability (TPL) by the state for the specified quarter.	11	Number (Decimal)
Total Rebate Amount Claimed	Product of the 'Rebate Amount Per Unit' field times the 'Total Units Reimbursed' field. This figure represents the total rebate amount claimed for a National Drug Code (NDC) by the state for the specified quarter. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as a zero in this field.	11	Number (Decimal)
Total Units Reimbursed	Displays the total number of converted units reimbursed to providers by the state for a National Drug Code (NDC) for the specified quarter. If there is a discrepancy between Centers for Medicare and Medicaid Services (CMS) unit of measure and the state paid claims unit of measure, the units are replaced by the units from the conversion table.	13	Number (Decimal)

7.3 RBT-2000-Q -- Drug Rebate Adjustment Invoice Report

7.3.1 RBT-2000-Q -- Drug Rebate Adjustment Invoice Report Narrative

The Drug Rebate Adjustment Invoice report provides the manufacturer a quarterly list by invoice period of each National Drug Code (NDC) with utilization changes. The utilization changes are a result of provider-initiated adjusted drug claims or manual unit adjustments made by the state agency. The information is a total replacement record for the line item of the original invoice detail, and may contain rate changes as well. Separate utilization invoices are produced for each rebate program (e.g. Federal, State Supplemental). It can be emailed, printed, or routed to FEITH.

7.3.2 RBT-2000-Q -- Drug Rebate Adjustment Invoice Layout

Report : RBT-2000-Q	ALABAMA MEDICAID AGENCY	Run Date: 03/14/2002						
Process : RBTJQ246	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: 07:53						
Location: DREX0246	DRUG REBATE INVOICE - FEDERAL	Page: 1						
	ADJUSTMENT INVOICE - REPLACEMENT RECORDS							
	INVOICE QUARTER: 3/2001							
LABELER NAME: XXX XXXXX XXX XXXXXX	LABELER CODE: 99999 STATE CODE: XX	RECORD ID: XXXX						
PERIOD COVERED	NDC NUMBER	DRUG NAME	REBATE AMOUNT PER UNIT	CMS UNIT	NEW TOTAL UNITS REIMBURSED	TOTAL REBATE AMOUNT CLAIMED	NUMBER OF SCRIPTS	TOTAL PROVIDER REIMBURSEMENT
1/2000	99999-9999-99	XXXXXXX	\$20.000000	TAB	11,111,111.111	\$222,222,222.22	123,456	\$333,333,333.33
1/2000	99999-9999-99	XXXXXXX-X	\$20.000000	TAB	11,111,111.115	\$222,222,222.30	123,457	\$333,333,333.34
PERIOD TOTALS:					22,222,222.226	\$444,444,444.52	246,913	\$666,666,666.67
TOTAL UTILIZATION CHANGES:					2			

7.3.3 RBT-2000-Q -- Drug Rebate Adjustment Invoice Field Descriptions

Field	Description	Length	Data Type
CMS Unit	Represents the smallest unit of measure for each drug. The rebate amount reflects the type of unit of measurement. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'XXX' in this field as well.	3	Character
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
Invoice Quarter	Uniquely identifies a specific labeler and quarter.	5	Date (Q/CCYY)

Field	Description	Length	Data Type
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Number (Integer)
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
NDC Number	Unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code and the 2-digit package size code.	11	Number (Integer)
New Total Units Reimbursed	New total number of units reimbursed by the Agency.	11	Number (Decimal)
Number of Scripts	New total number of prescriptions that were filled for a National Drug Code (NDC). This field is informational only and is not used in calculating the rebate amount.	6	Number (Decimal)
Period Covered	Period that is covered in this report (i.e. the original invoice quarter whose records were replaced during this invoice cycle).	5	Date (Q/CCYY)
Period Totals	Period totals for the units reimbursed, rebate claimed, scripts and provider reimbursement.	14	Number (Decimal)
Rebate Amount Per Unit	Rebate amount per unit reported to Centers for Medicare and Medicaid Services (CMS) by the manufacturer.	8	Number (Decimal)
Record ID	This field displays the Record ID of the invoice. Currently, the only value allowed in this field is FFSU.	4	Character
State Code	State abbreviation to indicate which state Health Coverage Program is billing the labeler.	2	Character
Total Provider Reimbursement	New total state Health Coverage Programs dollars paid, including dispensing fees, for a National Drug Code (NDC).	11	Number (Decimal)
Total Rebate Amount Claimed	Product of the 'Rebate Amount Per Unit' field times the 'Total Units Reimbursed' field. This figure represents the total rebate amount claimed for a National Drug Code (NDC) by the state for the specified quarter. If there is not a record on the quarterly rate tape for a NDC that has had utilization, it will report as a zero in this field.	11	Number (Decimal)
Total Utilization Changes	Number of utilization changes for all invoice periods.	11	Number (Integer)

7.4.3 RBT-2002-Q -- Drug Rebate Invoice Summary Field Descriptions

Field	Description	Length	Data Type
Invoice Cycle Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Invoice Number	Uniquely identifies a specific labeler and quarter	10	Character
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
Net Manufacturer Totals	Provides the invoice cycle totals (by labeler) for the following fields: Total Units Billed, Total Rebate Amount Claimed, Total Interest Amount Claimed, Total Scripts, and Total Reimbursement.	13	Number (Decimal)
Summary By Quarter	Displays the type of adjustment and the quarter to which it was made. There are four adjustment types: Utilization Rate Interest Original Invoice	34	Character
Total Interest Amount Claimed	Total interest amount claimed for that quarter.	11	Number (Decimal)
Total Number of Labelers Invoiced for Q/CCYY	Total number of labelers invoiced for that quarter.	4	Number (Integer)
Total Rebate Amount Claimed	Total rebate amount claimed for this National Drug Code (NDC).	11	Number (Decimal)
Total Reimbursement	Total reimbursement amount for that quarter.	12	Number (Decimal)
Total Scripts	Total number of scripts for that quarter.	9	Number (Decimal)
Total Units Billed	Total units billed for that quarter.	13	Number (Decimal)

7.5 RBT-2002-S -- Drug Rebate Invoice Summary Report

7.5.1 RBT-2002-S -- Drug Rebate Invoice Summary Report Narrative

The Drug Rebate Invoice Summary report is the summary and totals information for the RBT-2002-Q report. Please refer to the RBT-2002-Q report for detail information and report layout. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.5.2 RBT-2002-S -- Drug Rebate Invoice Summary Report Layout

Report : RBT-2002S		ALABAMA MEDICAID AGENCY				Run Date: MM/DD/CCYY	
Process : RBTJQ250		MEDICAID MANAGEMENT INFORMATION SYSTEM				Run Time: HH:MM:SS	
Location: DRIN2002		DRUG REBATE INVOICE SUMMARY REPORT - FEDERAL				Page: 1	
		INVOICE CYCLE QUARTER: Q/CCYY					
TOTALS FOR ALL QUARTERS AND ALL MANUFACTURERS							
QUARTER	YEAR	TOTAL UNITS BILLED	TOTAL REBATE AMOUNT CLAIMED	TOTAL INTEREST AMOUNT CLAIMED	TOTAL SCRIPTS	TOTAL REIMBURSEMENT	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
Q	CCYY	9,999,999,999.999	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99	
	UNIT ADJ	:	999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99
	PPA	:	999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99
	DISKETTE	:	999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99
	FTP	:	999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99
	PAPER	:	999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99
TOTALS	:		999,999,999.99	\$ 999,999,999.99	\$ 999,999,999.99	999,999,999	\$ 999,999,999.99

** End of Report **

7.5.3 RBT-2002-S -- Drug Rebate Invoice Summary Report Field Descriptions

Field	Description	Length	Data Type
Diskette	Total number of invoices sent by diskette.	11	Number (Decimal)
FTP	Total number of invoices sent by File Transfer Protocol (FTP).	11	Number (Decimal)
Invoice Cycle Quarter	Quarter/year of the invoice cycle in question.	5	Date (Q/CCYY)
Quarter	Quarter of the invoice cycle in question.	1	Number (Integer)
Paper	Total number of invoices sent by paper.	11	Number (Decimal)
PPA	Prior Period Adjustment.	11	Number (Decimal)
Total Interest Amount Claimed	Total interest amount claimed for that quarter	11	Number (Decimal)
Total Rebate Amount Claimed	Total rebate amount claimed for this National Drug Code (NDC).	11	Number (Decimal)
Total Reimbursement	Total reimbursement amount for that quarter.	11	Number (Decimal)
Total Scripts	Total number of scripts for that quarter.	9	Number (Integer)
Total Units Billed	Total units billed for that quarter.	13	Number (Decimal)
Totals	Provides the invoice cycle totals (for all quarters and manufacturers) for the following fields: Total Units Billed, Total Rebate Amount Claimed, Total Interest Amount Claimed, Total Scripts and Total Reimbursement.	11	Number (Decimal)
Unit ADJ	Total amount of units adjusted.	11	Number (Decimal)
Year	Year of the invoice cycle in question.	4	Date (CCYY)

7.6 RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report

7.6.1 RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Narrative

The Drug Rebate Manufacturer Remittance Summary report allows labelers to specify how their invoice payments should be applied. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced quarterly and can be emailed, printed, or routed to FEITH. This report is not currently used by Alabama.

7.6.2 RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Layout

Report : RBT-2003-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJQ250	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: DRIN2002	MEDICAID REBATE PROGRAM - FEDERAL	Page: 9999
	MANUFACTURER REMITTANCE SUMMARY	

INVOICE QUARTER:	XXXXXX
LABELER CODE:	XXXXX
MANUFACTURER NAME:	XX

QUARTER	REBATE AMOUNT PAID	INTEREST AMOUNT PAID	TOTAL AMOUNT PAID
9/9999			

** PLEASE REMIT THIS AMOUNT TO: ALABAMA MEDICAID AGENCY
 ATTN: DRUG REBATE
 501 DEXTER AVENUE
 PO BOX 5624
 MONTGOMERY, AL 36103-5624

*** RETURN THIS SUMMARY WITH PAYMENT TO ENSURE PROPER CREDIT ***

Report : RBT-2003-Q
 Process : RBTJQ250
 Location: DRIN2002

ALABAMA MEDICAID AGENCY
 MEDICAID MANAGEMENT INFORMATION SYSTEM
 MEDICAID REBATE PROGRAM - SUPPLEMENTAL
 MANUFACTURER REMITTANCE SUMMARY

Run Date: MM/DD/CCYY
 Run Time: HH:MM:SS
 Page: 9999

INVOICE QUARTER: XXXXXX
 LABELER CODE: XXXXX
 MANUFACTURER NAME: XX

QUARTER	REBATE AMOUNT PAID	INTEREST AMOUNT PAID	TOTAL AMOUNT PAID
9/9999			
Total			

** PLEASE REMIT THIS AMOUNT TO: ALABAMA MEDICAID AGENCY
 ATTN: DRUG REBATE
 501 Dexter Avenue
 PO BOX 5624
 Montgomery, AL 36103-5624

*** RETURN THIS SUMMARY WITH PAYMENT TO INSURE PROPER CREDIT ***

7.6.3 RBT-2003-Q -- Drug Rebate Manufacturer Remittance Summary Report Field Descriptions

Field	Description	Length	Data Type
Interest Amount Paid	Total amount that the labeler will apply toward interest for the quarter. This field is left blank for the labeler to fill in.	0	Number (Decimal)
Invoice Quarter	Uniquely identifies a specific labeler and quarter	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Manufacturer Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
Quarter	Every quarter in which an adjustment was made, since the last cycle.	6	Number (Integer)
Rebate Amount Paid	Total amount that the labeler will apply toward rebates for the quarter. This field is left blank for the labeler to fill in.	0	Number (Decimal)
Total	Sum of the following fields: Rebate Amount Paid Interest Amount Paid Total Amount Paid This field is left blank for the labeler to fill in.	0	Number (Decimal)
Total Amount Paid	Total amount that the labeler will apply toward the quarter. This field is left blank for the labeler to fill in.	0	Number (Decimal)

7.7 RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report

7.7.1 RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Narrative

The Drug Rebate CMS Unit Discrepancy report identifies NDCs on the quarterly rate tape with a unit of measure that does not correspond to the unit of measure on the drug database, First Data Bank (FDB). This report is produced quarterly and is used to reconcile the discrepancies by updating the unit conversion tables as necessary. It can be emailed, printed, or routed to FEITH.

7.7.2 RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Layout

Report: RBT-2004-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process: RBTJQ250	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT2004Q	DRUG REBATE CMS UNIT DISCREPANCY REPORT	Page: 9999
	INVOICE QUARTER: Q/CCYY	

NDC NUMBER	CMS DRUG NAME	REBATE AMOUNT PER UNIT	FDB DRUG DESCRIPTION	FDB UNIT DRUG FORM CODE	CMS UNIT
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999
99999-9999-99	XXXXXXXXXX	999999.999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XX	999

NUMBER OF NDC UNIT DISCREPANCIES: 99999

** End of Report **

7.7.3 RBT-2004-Q -- Drug Rebate CMS Unit Discrepancy Report Field Descriptions

Field	Description	Length	Data Type
CMS Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
CMS Unit	Represents the smallest unit of measure for each drug. The rebate amount reflects the type of unit of measurement. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'XXX' in this field as well.	3	Character
FDB Drug Description	Description of the drug provided by First Data Bank (FDB).	30	Character
FDB Unit Drug Form Code	Drug form code that indicates the basic unit of measure for performing price calculations	2	Character
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
NDC Number	Unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code, and the 2-digit package size code.	11	Number (Integer)
Number of NDC Unit Discrepancies	Total number of National Drug Code (NDC) unit discrepancies.	5	Number (Integer)
Rebate Amount Per Unit	Rebate amount per unit reported to Centers for Medicare and Medicaid (CMS) by the labeler and provided to each state.	12	Number (Decimal)

7.8 RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report

7.8.1 RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report Narrative

The Drug Rebate Amount > Reimbursement Amount report identifies NDCs with a manufacturer rebate amount claimed that is greater than the total amount reimbursed to the provider. This report enables interChange AMMIS clients to produce pharmacy-billing guidelines for provider educational purposes to be administered with both provider bulletins and/or workshops. This report creates a supplement to a bulletin that outlines the most common erroneously billed products by NDC, with a method of correction. This report breaks on rebate program (e.g. Federal, State Supplemental) and is produced quarterly. It can be emailed, printed, or routed to FEITH.

7.8.2 RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Layout

REPORT: RBT-2005-Q
PROCESS: RBTJQ250
LOCATION: RBT2005Q

ALABAMA MEDICAID AGENCY
MEDICAID MANAGEMENT INFORMATION SYSTEM
DRUG REBATE AMOUNT > REIMBURSEMENT AMOUNT - FEDERAL
INVOICE QUARTER: Q/CCYY

RUN DATE: MM/DD/CCYY
RUN TIME: HH:MM:SS
PAGE: 1

NDC NUMBER	DRUG NAME	REBATE AMOUNT PER UNIT	CMS UNIT	TOTAL UNITS REIMBURSED	TOTAL REBATE AMOUNT CLAIMED	TPL AMOUNT	NUMBER OF SCRIPTS	TOTAL PROV REIMBURSEMENT
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99
99999-9999-99	XXXXXXXX-X	\$0.9999999999	XXX	9,999,999.99	\$9,999,999.99	\$9,999,999.99	9999999	\$9,999,999.99

TOTAL NUMBER OF NDCs W/ INVOICE AMOUNT > REIMBURSEMENT AMOUNT: 99999

** END OF REPORT **

7.8.3 RBT-2005-Q -- Drug Rebate Amount > Reimbursement Amount Report Field Descriptions

Field	Description	Length	Data Type
CMS Unit	Represents the smallest unit of measure for each drug. The rebate amount reflects the type of unit of measurement. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'XXX' in this field as well.	3	Character
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
Invoice Quarter	Quarter and year being reported.	5	Date (Q/CCYY)
NDC Number	Unique National Drug Code that identifies each drug. This field will comprise the 5-digit labeler code, the 4-digit product code, and the 2-digit package size code.	11	Number (Integer)
Number of Scripts	Total number of prescriptions that were filled for a National Drug Code. This field is informational only and is not used in calculating the rebate amount.	7	Number (Integer)
Rebate Amount Per Unit	Rebate amount per unit calculated and provided to CMS.	12	Number (Decimal)
TPL Amount	Third party liability amount.	9	Number (Decimal)
Total Number of NDCs w/ Invoice Amount > Reimbursement Amount	Total number of National Drug Codes with an invoice amount greater than the reimbursement amount.	5	Number (Integer)
Total Prov Reimbursement	Total State Health Coverage Programs dollars paid, including dispensing fees, for a National Drug Code by interChange client for the specified quarter.	9	Number (Decimal)
Total Rebate Amount Claimed	Product of the Rebate Amount Per Unit times the Total Units Reimbursed. This figure represents the total rebate amount claimed for this National Drug Code by interChange client.	9	Number (Decimal)
Total Units Reimbursed	Total number of units reimbursed by interChange client for a National Drug Code for a specified quarter.	9	Number (Decimal)

7.9 RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report

7.9.1 RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report Narrative

The Drug Rebate Invoice \$50 or Less report identifies all manufacturers with invoice amounts of less than the \$50 threshold amount. The invoices identified on this report are mailed to the manufacturer for information purposes and as a good faith effort to collect the rebate dollars. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.9.2 RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Report Layout

Report : RBT-2006-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJQ250	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT2006Q	DRUG REBATE INVOICE \$50 OR LESS	Page: 9999
	INVOICE QUARTER: Q/CCYY	

LABELER CODE	LABELER NAME	REBATE AMOUNT CLAIMED
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
XXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	\$Z,ZZZ,ZZZ,ZZ9.99
	TOTAL REBATE AMOUNT CLAIMED	\$ZZ,ZZZ,ZZZ,ZZ9.99
	NUMBER OF LABELERS INVOICED FOR \$50.00 or LESS:	9999
	NUMBER OF LABELERS INVOICED FOR \$ 0:	9999

*** END OF REPORT ***

7.9.3 RBT-2006-Q -- Drug Rebate Invoice \$50 or Less Field Descriptions

Field	Description	Length	Data Type
Invoice Quarter	Indicates the quarter and year being reported. Valid format is Q/CCYY.	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character

Field	Description	Length	Data Type
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
Number of Labelers Invoiced for \$0	Total number of labelers invoiced for \$0.	4	Number (Integer)
Number of Labelers Invoiced for \$50 or Less	Total number of labelers invoiced for \$50 or less, but not for \$0.	4	Number (Integer)
Rebate Amount Claimed	Product of the Rebate Amount Per Unit times the Total Units Reimbursed. This figure represents the total rebate amount claimed for this National Drug Code (NDC) by interChange client.	12	Number (Decimal)
Total Rebate Amount Claimed	Sum of the Rebate Amount Claimed field.	13	Number (Decimal)

7.10 RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report

7.10.1 RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Narrative

The Drug Rebate CMS Rate Per Unit Discrepancy report identifies Rebate Per Unit (RPU) discrepancies. The report is used to research and resolve RPU discrepancies with CMS and manufacturers. It identifies NDCs where the RPU from the quarterly CMS tape differs from the RPU on the invoice for that specific NDC and quarter. The discrepancy would be the result of a manual change to the RPU from the Prior Period Adjustment panel. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.10.2 RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Layout

Report : RBT-2007-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJQ400	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: DRBT0400	DRUG REBATE CMS RATE PER UNIT DISCREPANCY	Page: 9999
	INVOICE QUARTER: Q/CCYY	

QUARTER	NDC	DRUG NAME	CMS REBATE AMOUNT PER UNIT	STATE REBATE AMOUNT PER UNIT	REBATE AMOUNT DIFFERENCE
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99
Q/CCYY	99999-9999-99	XXXXXXXXXX	9.999999999999	9.999999999999	\$ZZ,ZZZ,ZZ9.99

TOTAL REBATE AMOUNT CLAIMED DIFFERENCE: \$ZZ,ZZZ,ZZ9.99

NUMBER OF DISCREPANCIES: 99,999,999

*** END OF REPORT ***

7.10.3 RBT-2007-Q -- Drug Rebate CMS Rate Per Unit Discrepancy Report Field Descriptions

Field	Description	Length	Data Type
CMS Rebate Amount Per Unit	Most current rebate amount per unit calculated by Centers for Medicare and Medicaid Services (CMS) and provided to interChange client.	13	Number (Decimal)

Field	Description	Length	Data Type
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
NDC	Unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code, and the 2-digit package size code.	11	Number (Integer)
Number of Discrepancies	Total number of Prior Period Adjustment discrepancies on this report.	8	Number (Decimal)
Quarter	Invoiced quarter and year of the prior period adjustment.	5	Date (Q/CCYY)
Rebate Amount Difference	Difference between the rebate amount as originally calculated and the calculation after the adjustment.	10	Number (Decimal)
State Rebate Amount Per Unit	Rebate amount per unit calculated by the manufacturer and provided to the interchange client.	13	Number (Decimal)
Total Rebate Amount Claimed Difference	Sum of all of the Rebate Amount Claimed Difference fields for each invoice.	10	Number (Decimal)

7.11 RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report

7.11.1 RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Narrative

The Drug Rebate NDCS W/2 QTRS URA=0 report lists all NDCs on the CMS tape where the Unit Rebate Amount has been zero for two consecutive quarters. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.11.2 RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Layout

Report: RBT-2008-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process: RBTJQ405	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT2008Q	DRUG REBATE NDCS W/2 QTRS URA = 0	Page: 9999
	INVOICE QUARTER: Q/CCYY	
NDC	DRUG NAME	FDB DRUG DESCRIPTION
99999-9999-99	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
99999-9999-99	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
99999-9999-99	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	NUMBER OF NDCS:	9999
** END OF REPORT **		

7.11.3 RBT-2008-Q -- Drug Rebate NDCS W/2 QTRS URA=0 Report Field Descriptions

Field	Description	Length	Data Type
Drug Name	Drug description as found on the Centers for Medicare and Medicaid (CMS) quarterly tape.	10	Character
FDB Drug Description	Description of the drug, as supplied by First Data Bank (FDB), which is carried on the Drug Master file.	30	Character
Invoice Quarter	Quarter and year of the invoice period for which the report is produced.	5	Date (Q/CCYY)
NDC	Unique National Drug Code (NDC) that identifies each drug.	11	Number (Integer)
Number of NDCs	Number of National Drug Codes (NDC) included on the report.	4	Number (Integer)

7.12 RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report

7.12.1 RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Narrative

The Drug Rebate NDCs Not on CMS report lists all NDCs that had utilization in the current quarter, but were not on the CMS tape. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.12.2 RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Layout

Report: RBT-2010-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process: RBTJQ41C	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT201CQ	DRUG REBATE NDCS NOT ON CMS	Page: 9999
	INVOICE QUARTER: Q/CCYY	
NIC	LABELER NAME	DRUG NAME
9999-9999-99	XX	XXXXXXXXXX
9999-9999-99	XX	XXXXXXXXXX
9999-9999-99	XX	XXXXXXXXXX
	NUMBER OF NDCS:	9999
	** END OF REPORT **	

7.12.3 RBT-2010-Q -- Drug Rebate NDCs Not on CMS Report Field Descriptions

Field	Description	Length	Data Type
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) rate tape.	10	Character
Invoice Quarter	Quarter and year of the Centers for Medicare and Medicaid Services (CMS) tape being compared to the National Drug Code (NDC) master file.	5	Date (Q/CCYY)
Labeler Name	Name of labeler of this specific National Drug Code (NDC).	39	Character
NDC	Displays the unique National Drug Code that identifies each drug. The National Drug Code includes the five-digit labeler code, the four-digit product code, and the two-digit package size code.	11	Number (Integer)
Number of NDCs	Total number of National Drug Codes (NDC) reported.	4	Number (Integer)

7.13 RBT-2011-Q -- Drug Rebate Invoice Summary Activity Report

7.13.1 RBT-2011-Q -- Drug Rebate Invoice Summary Activity Report Narrative

The Drug Rebate Invoice Summary report provides summary-level invoice data. This report is essential for performing quality control measures to justify that the invoice data is accurate and consistent with previous quarterly invoice data. This report breaks on rebate program (e.g. Federal, State Supplemental) and is produced quarterly. It can be emailed, printed, or routed to FEITH.

7.13.2 RBT-2011-Q -- Drug Rebate Invoice Summary Activity Layout

Report : RBT-2011-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJQ255	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: DRIN2011	DRUG REBATE INVOICE - FEDERAL	Page: 9999
	INVOICE QTR: Q/CCYY	
	QUARTER/YEAR	9/9999
	NUMBER OF LABELERS INVOICED	ZZZ,ZZZ,ZZ9
	NUMBER OF LABELERS WITH INVOICE = \$0	ZZZ,ZZZ,ZZ9
	NUMBER OF LABELERS WITH INVOICE \$50 or LESS	ZZZ,ZZZ,ZZ9
	NUMBER OF SCRIPTS INVOICED	ZZZ,ZZZ,ZZ9
	NUMBER OF NDCs INVOICED	ZZZ,ZZZ,ZZ9
	TOTAL REBATE AMOUNT CLAIMED	\$Z,ZZZ,ZZZ,ZZ9.99
	NUMBER OF LABELERS INVOICED WITH ELECTRONIC DATA	ZZZ,ZZZ,ZZ9
	NUMBER OF PHS PROVIDERS	ZZZ,ZZZ,ZZ9
	NUMBER OF PHS CLAIMS	ZZZ,ZZZ,ZZ9
** END OF REPORT **		

7.13.3 RBT-2011-Q -- Drug Rebate Invoice Summary Activity Field Descriptions

Field	Description	Length	Data Type
Invoice Quarter	Quarter and year of the Centers for Medicare and Medicaid Services (CMS) tape being compared to the National Drug Code (NDC) master file.	5	Date (Q/CCYY)
Number of Labelers Invoiced	Number of labelers invoiced for the quarter.	9	Number (Decimal)
Number of Labelers Invoiced with Electronic Data	Number of labelers invoiced with electronic data in the quarter.	9	Number (Decimal)
Number of Labelers with Invoice \$50 or Less	Number of labelers invoiced with amounts less than \$zz (zz is the amt_threshold).	9	Number (Decimal)

Field	Description	Length	Data Type
Number of Labelers with Invoice = \$0	Number of labelers invoiced with \$0.00 amounts.	9	Number (Decimal)
Number of NDCs Invoiced	Number of National Drug Codes invoiced for the quarter.	9	Number (Decimal)
Number of PHS Claims	Number of Public Health Service (PHS) claims and Indian Health Service (IHS) paid in the quarter.	11	Number (Decimal)
Number of Scripts Invoiced	Number of scripts invoiced for the quarter.	9	Number (Decimal)
Number of PHS Providers	Total number of Public Health Service (PHS) and Indian Health Service (IHS) providers who had claims extracted from cycle processing for the quarter.	9	Number (Decimal)
Quarter/Year	Year and quarter of the current invoicing cycle.	5	Date (Q/CCYY)
Total Rebate Amount Claimed	Represents the total rebate amount claimed for this quarter by the Agency.	12	Number (Decimal)

7.14 RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report

7.14.1 RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Narrative

The Drug Rebate CMS Quarterly Updates report is used to compile information for the quarterly bulletin used to notify providers of non-covered drug-effectiveness source identifier (DESI) items. The report is also used to update the drug reference file of non-covered DESI services. DESI drugs are identified on the report with a classification of 5 and 6. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.14.2 RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Layout

Report : RBT-2012-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY									
Process : RBTJQ215	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS									
Location: RBT2012Q	CMS QUARTERLY UPDATES	Page: 9999									
	INVOICE QUARTER: Q/CCYY										
NDC	Drug Description	FDA FDA Appr Dte	Market Ent Dte	CMS Term Dte	Generic Ind	CMS UPPTS	CMS Unit	--- DESI Ind	--- Eff Dte	CMS DrugType	CDE SRC
9999999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XX	CCYMMDD	CCYMMDD	CCYMMDD	X	99999999	XXX	X	CCYMMDD	X	XX
9999999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XX	CCYMMDD	CCYMMDD	CCYMMDD	X	99999999	XXX	X	CCYMMDD	X	XX
9999999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XX	CCYMMDD	CCYMMDD	CCYMMDD	X	99999999	XXX	X	CCYMMDD	X	XX
9999999999	XXXXXXXXXXXXXXXXXXXXXXXXXXXX XX	CCYMMDD	CCYMMDD	CCYMMDD	X	99999999	XXX	X	CCYMMDD	X	XX
TOTAL NUMBER OF NDC: 99,999,999											
** END OF REPORT **											

7.14.3 RBT-2012-Q -- Drug Rebate CMS Quarterly Updates Report Field Descriptions

Field	Description	Length	Data Type
CDE SRC	Indicates source of update information. Valid values include: CQ = CMS, FW = FDB.	2	Character
CMS Drug Type	Drug Type Indicator represents the Rx or Over the Counter (OTC) status of the drug product.	1	Character

Field	Description	Length	Data Type
CMS Term Dte	Date actually supplied to Centers for Medicare and Medicaid Services (CMS) from the drug manufacturer/distributor. The date represents the shelf life expiration date of the last batch produced.	8	Date (CCYYMMDD)
CMS UPPS	Units Per Package Size indicates the number of units per package as supplied on the CMS quarterly tape.	11	Number (Integer)
CMS Unit	Unit Type Indicator indicates the unit of measure as supplied on the Centers for Medicare and Medicaid Services (CMS) quarterly tape.	3	Character
DESI - Eff Dte	Date the Centers for Centers for Medicare and Medicaid Services (CMS) drug-effectiveness source identifier status took effect.	8	Date (CCYYMMDD)
DESI - Ind	Drug-effectiveness source identifier indicator from Centers for Medicare and Medicaid Services (CMS). Valid values are: 0 = NDC not on CMS tape (no information submitted by manufacturer) 2 = Safe and Effective or non-DESI 3 = DESI/IRS Drugs Under Review (no Notice of Opportunity for a Hearing [NOOH] issued) 4 = Less than effective DESI/IRS Drugs for Some Indications 5 = Less than effective DESI/IRS Drugs for All Indications 6 = Less than effective DESI/IRS Drugs Removed from the Market.	1	Character
Drug Description	Drug description found on the state database provided by First DataBank (FDB). If there is not a record, the state tables reports as 'Not Found'.	30	Character
FDA	Therapeutic class code of the drug.	2	Character
FDA Appr Dte	Date the Federal Drug Agency (FDA) approved the drug.	8	Date (CCYYMMDD)
Generic Ind	Centers for Medicare and Medicaid Services (CMS) drug category identifies single source, multi-source, or innovator status.	1	Character
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)

Field	Description	Length	Data Type
Market Ent Dte	Market Entry Date represents the date a manufacturer releases the drug product to the marketplace, as supplied on the Centers for Medicare and Medicaid Services (CMS) quarterly tape.	8	Date (CCYYMMDD)
NDC	Unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code, and the 2-digit package size code.	11	Number (Integer)
Total Number of NDC	Total number of National Drug Codes (NDC) reported.	8	Number (Integer)

7.15 RBT-2013-Q -- Drug Rebate NDCs URA= 0 W/ Paid Claims Report

7.15.1 RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Report Narrative

The Drug Rebate Utilization Exception report is used to identify discrepancies between the FDB drug master file and the CMS tape. This report lists NDCs that have a claim utilization with no corresponding record on the quarterly rate tape or that have a unit rebate amount equal to zero. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.15.2 RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Layout

REPORT: RBT-2013-Q		ALABAMA MEDICAID AGENCY				Run Date: MM/DD/CCYY	
PROCESS: RBTJQ250		MEDICAID MANAGEMENT INFORMATION SYSTEM				Run Time: HH:MM:SS	
LOCATION: RBT2013Q		DRUG REBATE NDCS URA = 0 W/PAID CLAIMS				Page: 9999	
		INVOICE QUARTER: Q/CCYY					
NDC	DRUG NAME	--- CURRENT QUARTER --- CLM COUNT	--- ORIG UNITS	TOTAL PROV REIMBURSEMENT	URA Q/CCYY	URA Q/CCYY	URA Q/CCYY
99999-9999-99	XXXXXXXXXX	99999999999	99999999999	999,999,999	0.000000	0.000000	0.000000
99999-9999-99	XXXXXXXXXX	99999999999	99999999999	999,999,999	0.000000	0.000000	0.000000
99999-9999-99	XXXXXXXXXX	99999999999	99999999999	999,999,999	0.000000	0.000000	0.000000
99999-9999-99	XXXXXXXXXX	99999999999	99999999999	999,999,999	0.000000	0.000000	0.000000
99999-9999-99	XXXXXXXXXX	99999999999	99999999999	999,999,999	0.000000	0.000000	0.000000
NUMBER OF NDCS: 9999							
** END OF REPORT **							

7.15.3 RBT-2013-Q -- Drug Rebate NDCs URA = 0 W/ Paid Claims Field Descriptions

Field	Description	Length	Data Type
Current Quarter CLM Count	Indicates the current quarter claim count. This is the number of claims that have no corresponding record on the rate Centers for Medicare and Medicaid Service (CMS) tape or that have a unit rebate amount equal to zero.	11	Number (Integer)
Current Quarter ORIG Units	Indicates the current quarter original units. This is the number of units associated with the current quarter claim count.	11	Number (Integer)

Field	Description	Length	Data Type
Drug Name	Drug description found on the Centers for Medicare and Medicaid Services (CMS) database provided to all state Health Coverage Programs. If there is not a record on the quarterly rate tape for a National Drug Code (NDC) that has had utilization, it will report as 'Not Found'.	10	Character
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
NDC	Displays the unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code and the 2-digit package size code. Items that are classified as a vaccine, nutritional or supply are not included on this report.	11	Number (Integer)
Number of NDCs	Displays the total number National Drug Codes (NDC) on the Utilization report with 'Not Found' as the description for the report.	4	Number (Integer)
Total Prov Reimbursement	Total state Health Coverage Programs dollars paid for a National Drug Code (NDC), including dispensing fees, but excluding co-payment amounts and Third Party Liability (TPL) by interChange client for the specified quarter.	9	Number (Decimal)
URA QCCYY (1)	Unit rebate amount for the current quarter.	7	Number (Decimal)
URA QCCYY (2)	Unit rebate amount for the previous quarter.	7	Number (Decimal)
URA QCCYY (3)	Unit rebate amount for the quarter prior to the previous quarter.	7	Number (Decimal)

7.16 RBT-2014-Q -- Drug Rebate Address Update Report

7.16.1 RBT-2014-Q -- Drug Rebate Address Update Report Narrative

The Drug Rebate Address Update report identifies discrepancies to the address update process that need to be resolved with CMS, or the manufacturer. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.16.2 RBT-2014-Q -- Drug Rebate Address Update Report Layout

Report :	RBT-2014-Q	ALABAMA MEDICAID AGENCY	Run Date:	MM/DD/CCYY
Process :	RBTJQ320	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time:	HH:MM:SS
Location:	DRBT0014	DRUG REBATE ADDRESS UPDATE REPORT	Page:	9999
		INVOICE QUARTER: Q/CCYY		

LABELER CODE	LABELER NAME	EFFECTIVE DATE	TERMINATION DATE	MESSAGE
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX
XXXXX	XX	MM/DD/CCYY	MM/DD/CCYY	XX

TOTAL NUMBER OF LABELERS WITH ADDRESS INFORMATION UPDATED:	99,999
TOTAL LABELERS WITH NEW EFFECTIVE DATE (VERIFY EFFECTIVE DATE):	99,999
TOTAL NUMBER OF LABELERS WITH TERMINATION DATE UPDATED (VERIFY TERMINATION DATE):	99,999
TOTAL NUMBER OF NEW LABELERS ADDED:	99,999
TOTAL NUMBER OF LABELERS WITH NAME UPDATED:	99,999

END OF REPORT

7.16.3 RBT-2014-Q -- Drug Rebate Address Update Report Field Descriptions

Field	Description	Length	Data Type
Effective Date	Date a labeler begins participation in the Drug Rebate Program.	8	Date (MM/DD/CCYY)
Invoice Quarter	Displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character

Field	Description	Length	Data Type
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
Message	Updates or changes made to the Drug Rebate Address Maintenance window from the Centers for Medicare and Medicaid Services (CMS) Address tape.	50	Character
Termination Date	Date a labeler terminates participation in the Drug Rebate Program.	8	Date (MM/DD/CCYY)
Total Labelers with New Effective Date (Verify Effective Date)	Total number of labelers with effective date changes.	5	Number (Decimal)
Total Number of Labelers with Name Updated	Total number of labeler name changes.	5	Number (Decimal)
Total Number of Labelers with Address Information Updated	Total number of addresses updated.	5	Number (Decimal)
Total Number of Labelers with Termination Date Updated (Verify Termination Date)	Total number of labelers with termination date changes.	5	Number (Decimal)
Total Number of New Labelers Added	Total number of new labelers added.	6	Number (Decimal)

7.17 RBT-2015-R -- Drug Rebate Participation by Labeler Code Report

7.17.1 RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Narrative

The Drug Rebate Participation by Labeler Code report is used as an attachment to pharmacy provider bulletins. The report provides the labeler code, the labeler name, and the participation effective and end dates in the drug rebate program. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced upon request and can be emailed, printed, or routed to FEITH.

7.17.2 RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Layout

Report : RBT-2015-R		ALABAMA MEDICAID AGENCY		Run Date: MM/DD/CCYY
Process : RBTJR330		MEDICAID MANAGEMENT INFORMATION SYSTEM		Run Time: HH:MM:SS
Location: RBT2015R		DRUG REBATE PARTICIPATION		Page : 99999
		BY LABELER CODE		
LABELER CODE	LABELER NAME	REBATE EFFECTIVE DATE	REBATE TERMINATION DATE	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
99999	XX	MM/DD/CCYY	MM/DD/CCYY	
TOTAL ELIGIBLE LABELERS:		999		
TOTAL TERMINATED LABELERS:		999		
** END OF REPORT **				

7.17.3 RBT-2015-R -- Drug Rebate Participation by Labeler Code Report Field Descriptions

Field	Description	Length	Data Type
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the NDC.	5	Number (Integer)
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
Rebate Effective Date	Date a labeler begins participation in the Drug Rebate Program.	8	Date (MM/DD/CCYY)
Rebate Termination Date	Date a labeler terminates participation in the Drug Rebate Program.	8	Date (MM/DD/CCYY)
Total Eligible Labelers	Total number of eligible labelers participating in the Drug Rebate Program.	3	Number (Integer)
Total Terminated Labelers	Total number of terminated labelers that no longer participate in the Drug Rebate program.	3	Number (Integer)

7.18 RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report

7.18.1 RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Narrative

This report displays updates made to the Drug Master Table (t_drug) termination date, updates made to the CMSFDB Info Table (t_drug_cmsfdb_info) reactivation date, and all updates made to the DESI Table (t_desi).

7.18.2 RBT-2016-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Layout

Report : RBT-2016-Q 11/12/2015	ALABAMA MEDICAID AGENCY	Run Date:
Process : RBTJQ215 14:48:30	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time:
Location: RBT2016Q 1	CMSFDB FILE UPDATE REPORT-PHARMACY	Page:
CHANGE TO DRUG FILE CMS TERMINATION DATE	NDC: 00005250002 OLD: 0	FIBERCON 625 MG CAPLET NEW: 20141231
CHANGE TO CMSFDB INFO FILE CMS REACTIVATION DATE	NDC: 50419010510 OLD: 0	BETAPACE 80 MG TABLET NEW: 20160601
DESI UPDATE	NDC: 62856000110	HEXALEN 50 MG CAPSULE OLD: 6 NEW: 5
DESI ADDED	NDC: 63653117101	PLAVIX 75 MG TABLET DESI: 5
DESI ADDED	NDC: 63717089516	ZAMICET SOLUTION DESI: 6
DESI UPDATE	NDC: 63739000410	ACETAMINOPHEN-COD #3 TABLET OLD: 5 NEW: 6
*** END OF REPORT ***		

7.18.3 RBT-2012-Q -- Drug Rebate CMSFDB File Update-Pharmacy Report Field Descriptions

Field	Description	Length	Data Type
MESSAGE	The action-taken message displayed by the program.	131	Character

7.19 RBT-3000-M -- Accounts Receivable - By Labeler Report

7.19.1 RBT-3000-M -- Accounts Receivable - By Labeler Report Narrative

The Accounts Receivable by Labeler report monitors the age of the invoice, the associated collection activities, and outstanding balances. It is used to control and ensure that all efforts are being made to collect outstanding funds for the drug rebate program. The report details collection activity by labeler code and period for each invoice for the reporting period. It reports collection activities, adjustments such as rate changes, dispute resolution, and utilization, write-offs, interest amounts and outstanding balances. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced monthly and can be emailed, printed, or routed to FEITH.

7.19.2 RBT-3000-M -- Accounts Receivable - By Labeler Report Layout

Drug Rebate Accounts Receivable - By Labeler Report Layout

Report: RBT-3000-M Process: RETJM300 Location: DBET0300			ALABAMA MEDICAID AGENCY MEDICAID MANAGEMENT INFORMATION SYSTEM ACCOUNTS RECEIVABLE - BY LABELER - FEDERAL REPORT AS OF MM/DD/CCYY					Run Date: MM/DD/CCYY Run Time: HH:MM:SS Page: 999,999		
FOR LABELER: XXXXX										
INVOICE PERIOD	ORIGINAL AMOUNT INVOICED	REBATES COLLECTED	REBATE ADJUSTMENTS	REBATES WRITTEN-OFF	CURRENT REBATE AMOUNT DUE	INTEREST BILLED	INTEREST COLLECTED	INTEREST WRITTEN-OFF	INTEREST DUE	ENDING BALANCE
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/YYYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
SUB-TOTALS	\$9,999,999,999.99	\$9,999,999,999.99	\$999,999,999.99	\$9,999,999.99	\$9,999,999,999.99	\$9,999,999.99	\$9,999,999.99	\$9,999,999.99	\$9,999,999.99	\$9,999,999,999.99
GRAND TOTALS	\$99,999,999,999.99	\$99,999,999,999.99	\$9,999,999,999.99	\$99,999,999.99	\$99,999,999,999.99	\$9,999,999.99	\$9,999,999.99	\$9,999,999.99	\$9,999,999.99	\$99,999,999,999.99

** END OF REPORT **

7.19.3 RBT-3000-M -- Drug Rebate Accounts Receivable - By Labeler Report Field Descriptions

Field	Description	Length	Data Type
Current Rebate Amount Due	Rebate amount that is still outstanding for the invoice period. It is the sum of Original Amount Invoiced - Rebates Collected + Rebate Adjustments - Rebates Written Off.	11	Number (Decimal)
Ending Balance	Sum of Current Rebate Amount Due + Interest Due.	11	Number (Decimal)
Grand Totals	Summarizes all the subtotals for collection activity for each labeler.	12	Number (Decimal)
Interest Billed	Net interest amount billed to-date for each invoice period.	8	Number (Decimal)
Interest Collected	Total dollars of interest collected to-date, through the end of the reporting period, applied to respective invoice periods.	8	Number (Decimal)
Interest Due	Interest amount that is still outstanding for the invoice.	8	Number (Decimal)
Interest Written-Off	Interest amount that has been written-off.	8	Number (Decimal)
Invoice Period	Year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1- 4.	65	Date (Q/CCYY)
For Labeler	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Original Amount Invoiced	Represents the original invoice billed amount.	11	Number (Decimal)
Rebate Adjustments	This amount represents the rebate adjustments to-date, to be added to or subtracted from the original invoice amount as a result of a rebate amount per unit change, resolved dispute or utilization adjustment that increases or decrease an outstanding or credit balance for the specified quarter.	10	Number (Decimal)

Field	Description	Length	Data Type
Rebates Collected	This amount represents the total dollar amount applied to the drug rebate quarterly invoice during the reporting period. This amount contains interest payments and credit amounts resulting from an overpayment that has been re-applied to another invoice.	11	Number (Decimal)
Rebates Written-Off	Total dollar amount of rebates that will not be collected that has been written off.	8	Number (Decimal)
Report As Of	Date the report was created.	8	Date (MM/DD/CCYY)
Sub-totals	Summarizes the collection activity totals for each labeler.	12	Number (Decimal)

7.20 RBT-3001-M -- Accounts Receivable - By Invoice Period Report

7.20.1 RBT-3001-M -- Accounts Receivable -- By Invoice Period Report Narrative

The Accounts Receivable by Invoice Period report monitors the age of the invoice, the associated collection activities, and outstanding balances. It is used to control and ensure that all efforts are being made to collect outstanding funds for the drug rebate program. The report details collection activity by period / labeler code for each invoice for the reporting period. It reports collection activities, adjustments such as rate changes, dispute resolution, and utilization, write-offs, interest amounts, and outstanding balances. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced monthly and can be emailed, printed, or routed to FEITH.

7.20.2 RBT-3001-M -- Accounts Receivable - By Invoice Period Report Layout

Drug Rebate Accounts Receivable - By Period Report Layout

Report :	ALABAMA MEDICAID AGENCY							Run Date: MM/DD/YYYY			
Process :	MEDICAID MANAGEMENT INFORMATION SYSTEM							Run Time: HH:MM:SS			
Location:	ACCOUNTS RECEIVABLE - BY INVOICE PERIOD - FEDERAL							Page: 999,999			
REPORT AS OF MM/DD/YYYY											
INVOICE PERIOD : 1/1991											
LABELER CODE	ORIGINAL AMOUNT INVOICED	REBATES COLLECTED	REBATE ADJUSTMENTS	REBATES WRITTEN-OFF	CURRENT REBATE AMOUNT DUE	INTEREST BILLED	INTEREST COLLECTED	INTEREST WRITTEN-OFF	INTEREST DUE	ENDING BALANCE	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
XXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
SUB-											
TOTALS	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999.99	\$999,999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99	
GRAND	\$999,999,999.99		\$999,999,999.99		\$999,999,999.99		\$999,999.99		\$999,999.99		
TOTALS		\$999,999,999.99		\$999,999.99		\$999,999.99		\$999,999.99		\$999,999,999.99	

** END OF REPORT **

7.20.3 RBT-3001-M -- Drug Rebate Accounts Receivable - By Period Report Field Descriptions

Field	Description	Length	Data Type
Current Rebate Amount Due	Rebate amount that is still outstanding for the labeler. It is the sum of Original Amount Invoiced - Rebates Collected + Rebate Adjustments - Rebates Written Off.	12	Number (Decimal)
Ending Balance	Sum of Current Rebate Amount Due + Interest Due.	12	Number (Decimal)
Grand Totals	Summarizes all the subtotals for collection activity for each invoice period.	12	Number (Decimal)
Interest Billed	Interest amount billed for the invoice.	9	Number (Decimal)
Interest Collected	Total dollar amount of interest applied to the drug rebate quarterly invoice during the reporting period.	9	Number (Decimal)
Interest Due	Interest amount that is still outstanding for the invoice.	9	Number (Decimal)
Interest Written-Off	Interest amount that has been written-off.	12	Number (Decimal)
Invoice Period	The year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Original Amount Invoiced	Represents the original invoice billed amount.	1612	Number (Decimal)
Rebate Adjustments	This amount represents the rebate adjustments to-date, to be added to or subtracted from the original invoice amount as a result of a rebate amount per unit change, resolved dispute or utilization adjustment that increases or decrease an outstanding or credit balance for the specified quarter.	12	Number (Decimal)
Rebates Collected	This amount represents the total dollar amount applied to the drug rebate quarterly invoice during the reporting period. This amount contains interest payments and credit amounts resulting from an overpayment that has been re-applied to another invoice.	12	Number (Decimal)

Field	Description	Length	Data Type
Rebates Written-Off	Total dollar amount of rebates that will not be collected that has been written off.	9	Number (Decimal)
Report As Of	Date report was created.	8	Date (MM/DD/CCYY)
Sub-totals	Summarizes the collection activity totals for each invoice period.	12	Number (Decimal)

7.21 RBT-3002-D -- Drug Rebate Cash Exception Report

7.21.1 RBT-3002-D -- Drug Rebate Cash Exception Report Narrative

The Drug Rebate Cash Exception report measures compliance of applying drug rebate payments to an invoice within 24 hours of receipt. Therefore, the report helps prioritize workload. The report itemizes drug rebate CCNs that have not been fully applied to an invoice by the age of the CCN. This report is produced daily and can be emailed, printed, or routed to FEITH.

7.21.2 RBT-3002-D -- Drug Rebate Cash Exception Report Layout

Report : RBT-3002-D	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJD100	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT3002D	DRUG REBATE CASH EXCEPTION	Page: 999,999
	REPORTING DATE: MM/DD/CCYY	

CCN	CHECK AMOUNT	AMOUNT APPLIED	BALANCE TO APPLY	AGE
999999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
999999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
999999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
999999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
999999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
GRAND TOTALS	\$9,999,999,999.99	\$9,999,999,999.99	\$9,999,999,999.99	

*** END OF REPORT ***

7.21.3 RBT-3002-D -- Drug Rebate Cash Exception Report Field Descriptions

Field	Description	Length	Data Type
Age	Age of the cash control number. It indicates the number of days that have elapsed since the deposit date of the check and the time the report is generated.	5	Number (Integer)
Amount Applied	Dollar amount that has been applied to the labeler invoice(s). This amount represents all or a portion of the check amount applied to the labeler invoice(s).	10	Number (Decimal)
Balance to Apply	Accumulated amount from the check and/or cash control number that needs to be applied, to the labeler invoice (Balance to Apply = Check amount - Amount Applied).	10	Number (Decimal)

Field	Description	Length	Data Type
CCN	Unique number (cash control number) assigned to track cash receipts in the system.	11	Number (Integer)
Check Amount	Amount of the check that is being processed as a cash receipt.	10	Number (Decimal)
Grand Totals	Total dollar amount of the Check Amount, Amount Applied, and the Balance To Apply.	12	Number (Decimal)
Reporting Date	Date Report was created.	8	Date (MM/DD/CCYY)

7.22 RBT-3003-M -- Drug Rebate Credit Due – Federal Report

7.22.1 RBT-3003-M -- Drug Rebate Credit Due – Federal Report Narrative

The Drug Rebate Credit Due – Federal report monitors drug rebate credits. The report displays NDC details and CCNs in which the payment is greater than the current invoice amount.

This report breaks on rebate program (e.g. Federal, State Supplemental) and is produced monthly. It can be emailed, printed, or routed to FEITH.

7.22.2 RBT-3003-M -- Drug Rebate Credit Due – Federal Report Layout

Report : RBT-3003-M	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJM400	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT3003M	DRUG REBATE CREDIT DUE - Federal	Page: 999,999
	REPORTING DATE: MM/DD/CCYY	

LABELER NAME	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
LABELER CODE	XXXXX	
INVOICE NUMBER	NDC	CREDIT DUE
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
XXXXXXXXXXXX	XXXXXXXXXXXX	\$999,999,999.99
SUBTOTAL		\$9,999,999,999.99
GRAND TOTALS		\$9,999,999,999.99

*** END OF REPORT ***

7.22.3 RBT-3003-M -- Drug Rebate Labeler Credit Due – Federal Report Field Descriptions

Field	Description	Length	Data Type
Credit Due	Credit balance due for each specific National Drug Code (NDC) and invoice period. The amount represents the difference between the current total rebate amount claimed and rebate amount paid for each N. (Credit Due = Current Rebate Amount Claimed - Rebate Amount Paid).	11	Number (Decimal)

Field	Description	Length	Data Type
Grand Totals	Outstanding amount of credit due per all labeler codes listed on the report. The accumulated total of the Credit Due field for all labelers.	12	Number (Decimal)
Invoice Number	First five digits of the invoice number that represents the labeler code, and the last 5 digits that represent the year and quarter.	11	Character
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
NDC	Unique National Drug Code that identifies each drug. This field is comprised of the 5-digit labeler code, the 4-digit product code, and the 2-digit package size code. If a NDC has multiple overpayments, it will display each NDC associated with the cash control number.	11	Character
Reporting Date	Date Report was created.	108	Date (MM/DD/CCYY)
Subtotal	Outstanding amount of credit due per labeler code. The accumulated subtotal of the Credit Due field for each labeler.	12	Number (Decimal)

7.23 RBT-3004-D – Drug Rebate Invoice Disposition Exception – Federal Report

7.23.1 RBT-3004-D -- Drug Rebate Invoice Disposition Exception – Federal Report Narrative

The Invoice Disposition Exception – Federal report measures compliance in posting drug rebate dollars to the invoice detail within three days. The report helps prioritize workloads. The report itemizes drug rebate cash control numbers that have been applied to an invoice but are not fully dispositioned to the NDC detail by the age of the CCN. This report breaks on rebate program (e.g. Federal, State Supplemental) and is produced daily. It can be emailed, printed, or routed to FEITH.

7.23.2 RBT-3004-D -- Drug Rebate Invoice Disposition Exception – Federal Report Layout

CCN	INVOICE #	AMOUNT APPLIED	AMOUNT DISPOSITIONED TO DATE	BALANCE TO DISPOSITION	AGE
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
9999999999	9999999999	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99	99,999
GRAND TOTALS		\$9,999,999,999.99	\$9,999,999,999.99	\$9,999,999,999.99	

*** END OF REPORT ***

7.23.3 RBT-3004-D -- Invoice Disposition Exception Report – Federal Field Descriptions

Field	Description	Length	Data Type
Age	Age of the cash control number. It indicates the number of days that have elapsed since the deposit date of the check and the time the report is generated.	5	Number (Integer)
Amount Applied	Dollar amount that has been applied to the labeler invoice(s). This amount represents all or a portion of the check amount applied to the labeler invoice(s).	10	Number (Decimal)

Field	Description	Length	Data Type
Amount Dispositioned to Date	Amount that has been dispositioned to the invoice detail to date.	10	Number (Decimal)
Balance to Disposition	Accumulated amount that has been applied from the checks/cash control number but needs to be dispositioned to the invoice detail. (Balance to Disposition = Amount Applied - Amount Disposition to Date).	10	Number (Decimal)
CCN	Unique number assigned to track cash receipts in the system.	11	Number (Integer)
Grand Totals	Total dollar amount of the Amount Applied, Amount Disposition to Date, and the Balance to Disposition fields. The average of the AGE field is the total number of days divided by the number of outstanding cash control numbers.	12	Number (Decimal)
Invoice #	First five digits of the invoice number that represents the labeler code, and the last five digits that represent the year and quarter.	10	Number (Integer)
Reporting Date	Date Report was created.	8	Date (MM/DD/CCYY)

7.24 RBT-3005-Q -- Labelers W/ Highest Dispute Amounts – Federal Report

7.24.1 RBT-3005-Q -- Labelers W/ Highest Dispute Amounts - Federal Report Narrative

The Labelers with Highest Dispute Amounts report lists the labelers with the largest dispute amounts. This report is produced quarterly and breaks on rebate program (e.g. Federal, State Supplemental). It can be emailed, printed or routed to FEITH.

7.24.2 RBT-3005-Q -- Labelers with W/ Dispute Amounts - Federal Report Layout

Report : RBT-3005-Q	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJQ305	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: DRBT3005Q	LABELERS W/ HIGHEST DISPUTE AMOUNTS - FEDERAL	Page: 9999
INVOICE QTR: Q/CCYY		
LABELER CODE	LABELER NAME	TOTAL DISPUTE AMT
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
99999	XXX.	\$999,999.99
TOTALS:		\$9,999,999.99
** END OF REPORT **		

7.24.3 RBT-3005-Q -- Drug Rebate Labelers W/ Highest Dispute Amounts - Federal Report Field Descriptions

Field	Description	Length	Data Type
Invoice Quarter	The year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Labeler Code	Identifies the labeler of a drug. This code is assigned by Centers for Medicare and Medicaid Services (CMS) and is used as the first five characters of the labeler's National Drug Code (NDC).	5	Number (Integer)
Labeler Name	Name of the drug rebate labeler.	39	Character
Total Dispute Amount	Total disputed amount.	8	Number (Decimal)

Field	Description	Length	Data Type
Totals	Total of all the disputed amounts for the 100 labelers with the highest dispute amounts.	9	Number (Decimal)

7.25 RBT-3007-M -- Drug Rebate Delinquent Payments Report

7.25.1 RBT-3007-M -- Drug Rebate Delinquent Payments Report Narrative

The Drug Rebate Delinquent Payments report lists, by period, the labelers with delinquent rebate amounts due. This report is produced monthly and breaks on rebate program (e.g. Federal, State Supplemental). The report can be emailed, printed, or routed to FEITH.

Labelers are listed for the following two reasons:

1. No payments have been received after the 38th day of the invoice being sent (interest may start to accrue at this point).
2. No activity has been noted for a labeler/quarter for a period of six months (no payments, adjustments, write-offs).

7.25.2 RBT-3007-M -- Drug Rebate Delinquent Payments Report Layout

INVOICE QUARTER	NDC	NDC DESCRIPTION	ORIGINAL INVOICE AMOUNT	PAST DUE REBATE AMOUNT	DISPUTE	DAYS PAST DUE	TOTAL PAST DUE REBATE AMOUNT
Report : RBT-3007-M ALABAMA MEDICAID AGENCY Run Date: MM/DD/CCYY Process : RBTJM280 MEDICAID MANAGEMENT INFORMATION SYSTEM Run Time: HH:MM:SS Location: RBT3007Q DRUG REBATE DELINQUENT PAYMENTS - FEDERAL Page: 999,999 REPORT AS OF MM/DD/CCYY							
LABELER ID	LABELER NAME						
99999	XX						
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
Q/CCYY	XXXXXXXXXX	XXXXXXXXXXXXXXXXXXXX	\$9,999,999.99	\$9,999,999.99	X	9,999	\$999,999,999.99
GRAND TOTAL							\$999,999,999.99
END OF REPORT							

7.25.3 RBT-3007-M -- Drug Rebate Delinquent Payments Report Field Descriptions

Field	Description	Length	Data Type
Days Past Due	Total number of days that the invoice and amount are past due.	4	Number (Integer)
Dispute	Indicates whether the National Drug Code (NDC) is in dispute. A 'Y' indicates a dispute, otherwise the fields will be blank.	1	Character
Grand Total	Grand total of all past due rebate amounts for the reporting period.	11	Number (Decimal)
Invoice Quarter	Invoice quarter.	5	Date (Q/CCYY)
Labeler ID	Uniquely identifies the labeler of a drug. This code is assigned by Centers for Medicare and Medicaid Services (CMS) and is used as the first five characters of the labeler's National Drug Codes.	5	Number (Integer)
Labeler Name	Name of the drug labeler.	39	Character
NDC	National Drug Code assigned to a drug.	11	Number (Integer)
NDC Description	Description of the National Drug Code (NDC).	20	Character
Original Invoice Amount	The amount invoiced for the National Drug Code (NDC) on the original invoice.	9	Number (Decimal)
Past Due Rebate Amount	Rebate amount that is past due.	9	Number (Decimal)
Total Past Due Rebate Amount	Subtotal of the past due rebate amounts for each labeler.	11	Number (Decimal)

7.26 RBT-3500-M -- Drug Rebate Payments Received Report

7.26.1 RBT-3500-M -- Drug Rebate Payments Received Report Narrative

The Drug Rebate Payments Received report lists the drug rebate payments received within the specified time period. This report is produced monthly and can be emailed, printed, or routed to FEITH.

7.26.2 RBT-3500-M -- Drug Rebate Payments Received Report Layout

Report : RBT-3500-M		ALABAMA MEDICAID AGENCY				Run Date: MM/DD/CCYY	
Process : RBTJM350		MEDICAID MANAGEMENT INFORMATION SYSTEM				Run Time: HH:MM:SS	
Location: DRBT0350		DRUG REBATE PAYMENTS RECEIVED				Page: 999,999	
		REPORTING PERIOD: MM/DD/CCYY - MM/DD/CCYY					
REMITTER	RECEIPT DATE	CASH CONTROL NUMBER	CHECK NUMBER	CHECK DATE	POSTMARK DATE	TOTAL CCN AMOUNT	APPLIED AMOUNT
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	XXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	MM/DD/CCYY	MM/DD/CCYY	\$999,999,999.99	\$999,999,999.99
TOTAL CCN AMOUNT FOR THIS PERIOD: \$999,999,999.99							
TOTAL APPLIED AMOUNT FOR THIS PERIOD: \$999,999,999.99							
** END OF REPORT **							

7.26.3 RBT-3500-M -- Drug Rebate Payments Received Report Field Descriptions

Field	Description	Length	Data Type
Applied Amount	Amount applied for the invoice.	11	Number (Decimal)
Cash Control Number	Cash control number for the receipt.	11	Character
Check Date	Date on the check.	8	Date (MM/DD/CCYY)
Check Number	Check number.	30	Character
Deposit Date	Date the check was deposited.	8	Date (MM/DD/CCYY)
Postmark Date	Postmark date on the envelope in which the check came.	8	Date (MM/DD/CCYY)
Receipt Date	Date the check was received.	8	Date (MM/DD/CCYY)
Remitter	Name of the remitter of the payment.	40	Character
Reporting Period	From and through dates for this report.	16	Date (MM/DD/CCYY)
Total Applied Amount For This Period	Total Amount of the CCNs listed on the report that have been applied to invoices.	11	Number (Decimal)
Total CCN Amount	Total Amount of the CCN.	11	Number (Decimal)
Total CCN Amount For This Period	Total Amount of the CCNs listed on the report.	11	Number (Decimal)

7.27 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report

7.27.1 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Narrative

The Drug Rebate Receipts Weekly by Quarter - Federal report lists all cash receipts received within the specified period and to what quarter(s) they apply. This report is produced weekly and breaks on rebate program (e.g. Federal, State Supplemental). The report can be emailed, printed, or routed to FEITH.

7.27.2 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Layout

Report : RBT-3600-W	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY	
Process : RBTJW360	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS	
Location: DRBT0360	DRUG REBATE WEEKLY RECEIPTS BY QUARTER - FEDERAL	Page: 9999	
REPORTING PERIOD: MM/DD/CCYY - MM/DD/CCYY			
QUARTER	REBATE RECEIPTS	INTEREST	TOTAL RECEIPTS
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
Q/CCYY	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
TOTAL FOR THIS PERIOD:	\$99,999,999.99	\$99,999,999.99	\$99,999,999.99
** END OF REPORT **			

7.27.3 RBT-3600-W -- Drug Rebate Weekly Receipts By Quarter - Federal Report Field Descriptions

Field	Description	Length	Data Type
Interest	Total interest receipts posted for the week.	10	Number (Decimal)
Quarter	Quarter for which receipts were received.	5	Date (Q/CCYY)
Rebate Receipts	Total rebate receipts for the week.	10	Number (Decimal)

Field	Description	Length	Data Type
Reporting Period	Beginning and ending dates of the reporting period.	16	Date (MM/DD/CCYY)
Total Receipts	Total cash receipts posted for the week.	10	Number (Decimal)
Total for this Period	Total of the following columns: rebate receipts, interest, total receipts.	1210	Number (Decimal)

7.28 RBT-4000-M -- Drug Rebate Dispute Summary - Federal Report

7.28.1 RBT-4000-M -- Drug Rebate Dispute Summary Report - Federal Narrative

The Drug Rebate Dispute Summary - Federal report provides a comprehensive summary of dispute information for each invoice period. If an invoiced period has no activity it is not listed on the report. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced monthly and can be emailed, printed, or routed to FEITH.

7.28.2 RBT-4000-M -- Drug Rebate Dispute Summary Report - Federal Layout

INVOICE PERIOD	----- LABELERS	ACTIVE DISPUTES COUNT	----- DOLLARS	----- LABELERS	CLOSED DISPUTES COUNT	----- DOLLARS
9/9999	999,999	999,999	\$999,999,999.99	999,999	999,999	\$999,999,999.99
9/9999	999,999	999,999	\$999,999,999.99	999,999	999,999	\$999,999,999.99
9/9999	999,999	999,999	\$999,999,999.99	999,999	999,999	\$999,999,999.99
9/9999	999,999	999,999	\$999,999,999.99	999,999	999,999	\$999,999,999.99
9/9999	999,999	999,999	\$999,999,999.99	999,999	999,999	\$999,999,999.99
TOTALS:	99,999.999	99,999,999	\$9,999,999,999.99	99,999,999	99,999,999	\$9,999,999,999.99

** End of Report **

7.28.3 RBT-4000-M -- Drug Rebate Dispute Summary by Invoice Period Report - Federal Field Descriptions

Field	Description	Length	Data Type
Active Disputes Count	The total number of National Drug Codes (NDC) with open dispute details (CDE_STATUS = 0) for the specified invoice period.	6	Number (Decimal)
Active Disputes Dollars	The sum of the amount for all open dispute details (CDE_STATUS = 0) for the specified invoice period. This field can be positive or negative.	11	Number (Decimal)
Active Disputes Labelers	The total number of labelers with at least one open dispute detail (CDE_STATUS = 0) for the specific invoice period.	6	Number (Decimal)

Field	Description	Length	Data Type
Closed Disputes Count	The total number of National Drug Codes (NDC) with closed dispute details (CDE_STATUS = 1) for the specified invoice period.	6	Number (Decimal)
Closed Disputes Dollars	The total dollar amount of closed dispute details (CDE_STATUS = 1) for the specific invoice period. This field can be positive or negative. (Balance = New Rebate Claimed - Paid - Write-off).	11	Number (Decimal)
Closed Disputes Labelers	The total number of labelers with a closed status for all dispute details (CDE_STATUS = 1) for the specified invoice period.	6	Number (Decimal)
Invoice Period	The year and quarter of the invoice. The date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Reporting Period	From and To dates for this report.	16	Date (MM/DD/CCYY)
Totals	Sum of each field on the report.	12	Number (Decimal)

7.29 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report

7.29.1 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report Narrative

The Drug Rebate Amounts Billed, Adjusted and Collected report monitors drug rebate invoice amounts, adjustments, write-offs and collection activities by invoice period. The report is used to compile data for the CMS-64 report. This report breaks on rebate program (e.g. Federal, State Supplemental). This report is produced monthly and can be emailed, printed, or routed to FEITH.

7.29.2 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed, Adjusted and Collected) Report Layout

INVOICE PERIOD	ORIGINAL AMOUNT BILLED	WRITE-OFF	ADJUSTMENT AMOUNT	COLLECTED	REBATES RECEIVABLE
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
XXXXXXXXXXXXXX	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
YEAR TO DATE	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99
TOTAL	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99

** END OF REPORT **

7.29.3 RBT-4001-M -- Drug Rebate Amounts - Federal (Billed and Adjusted and Collected) Report Field Descriptions

Field	Description	Length	Data Type
Adjustment Amount	Amount represents a change in the dollar amount from the original invoice amount as a result of a rebate amount per unit change, resolved dispute and utilization adjustment that increases or decreases an outstanding or credit balance for the specified invoice period. (Adjusted Amount = Original Rebate Amount Claimed - Current Rebate Amount Claimed.)	11	Number (Decimal)
Collected	Amount represents the total dollar amount disposition to the specified invoice period.	11	Number (Decimal)
Invoice Period	Year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1- 4.	13	Character
Original Amount Billed	Represents the Rebate Amount Claimed of the original invoice for the specified invoice period	11	Number (Decimal)
Rebates Receivable	Uncollected = Original Invoice - Write-offs + or - Adjustments - Collected. This amount includes open disputes (CDE_STATUS = 0).	11	Number (Decimal)
Report As Of	Date the report was created.	8	Date (MM/DD/CCYY)
Total	Summarizes the subtotals for all activity totals for all invoice periods.	11	Number (Decimal)
Write-Off	Total dollar amount that will not be collected that has been written off.	11	Number (Decimal)
Year To Date	Summarizes the activity totals for each invoice period within a year.	11	Number (Decimal)

7.30 RBT-4002-Q -- Drug Rebate Aging Report

7.30.1 RBT-4002-Q -- Drug Rebate Aging Report Narrative

The Drug Rebate Aging report provides the information to prepare the CMS 64.9R report. It reports the beginning balances for invoices, newly invoiced amounts, adjustments, payments and the resulting balances (by quarter).

The CMS 64.9R report is a section (schedule) of the CMS 64 Quarterly Medicaid Statement of Expenditures for the Medical Assistance Program. Medicaid State agencies use the CMS 64 to report their actual program benefit costs and administrative expenses to the CMS. CMS then uses this information to compute the Federal financial participation (FFP) for the State's Medicaid Program costs. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.30.2 RBT-4002-Q -- Drug Rebate Aging Report Layout

Report: RBT-4002-Q		ALABAMA MEDICAID AGENCY				Run Date: MM/DD/CCYY	
Process: RBTJQ402		MEDICAID MANAGEMENT INFORMATION SYSTEM				Run Time: HH:MM:SS	
Location: RBT4002Q		DRUG REBATE AGING REPORT				PAGE: 1	
		QUARTER ENDING: MM/DD/CCYY					
	QTR ENDING MM/DD/CCYY	QTR ENDING MM/DD/CCYY	QTR ENDING MM/DD/CCYY	QTR ENDING MM/DD/CCYY	QTRS PRIOR MM/DD/CCYY	TOTAL	
Balance Beg	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Adjustments	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Rebates Inv	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Subtotal	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Receipts	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Balance End	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	
Interest	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	\$999,999,999.99	

** END OF REPORT **

7.30.3 RBT-4002-Q -- Drug Rebate Aging Report Field Descriptions

Field	Description	Length	Data Type
Adjustments	Adjustment amounts applied during the reporting quarter, which are applicable to a particular invoice 'produced' quarter.	11	Number (Decimal)
Balance Beg	Amounts invoiced less all payments and adjustments for prior quarters.	11	Number (Decimal)
Balance End	Subtotal less Receipts for each applicable quarter.	11	Number (Decimal)
Interest	Interest paid during the reporting quarter, which is applicable to a particular invoice 'produced' quarter.	11	Number (Decimal)
Rebates Inv	Amounts invoiced during the reporting quarter. Only the first column will display an amount and only for invoices 'produced' during the reporting quarter.	11	Number (Decimal)
Receipts	Receipts applied during the reporting quarter, which are applicable to a particular invoice 'produced' quarter.	11	Number (Decimal)
Subtotal	Balance Beginning less Adjustments plus Rebates Inventory.	11	Number (Decimal)

7.31 RBT-5000-R -- Drug Rebate Resolution Statement Report

7.31.1 RBT-5000-R -- Drug Rebate Resolution Statement Report Narrative

The Drug Rebate Resolution Statement report is used to notify the manufacturer that the dispute for an invoice period has been closed. The report provides the manufacturer with NDC detail data of the research and the dispute determination for the specific invoice period. This report breaks on rebate program (e.g. Federal, State Supplemental) This report is produced weekly and can be emailed, printed or routed to FEITH.

7.31.2 RBT-5000-R -- Drug Rebate Resolution Statement Report Layout

Report : RBT-5000-R	ALABAMA MEDICAID AGENCY	Run Date: MM/DD/CCYY
Process : RBTJW300	MEDICAID MANAGEMENT INFORMATION SYSTEM	Run Time: HH:MM:SS
Location: RBT5000R	DRUG REBATE RESOLUTION STATEMENT - FEDERAL	Page: 999,999
	INVOICE PERIOD: Q/CCYY	

LABELER CODE	XXXXXX	LABELER NAME	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	INVOICE PERIOD	XXXXXX	STATE CODE	XX			
NDC	CURRENT REBATE AMT PER UNIT	TOTAL UNITS REIMBURSED TO PROVIDER	CURRENT REBATE AMOUNT CLAIMED	UNITS PAID BY LABELER	REBATE AMOUNT PAID BY LABELER	STATE NEW ADJUSTED UNITS	BALANCE OF UNITS DUE	BALANCE DUE FROM LABELER	RSN CDE	RESO CODE
XXXXXX	XXXXXXXXXXXXXX	9,999,999,999.999	\$999,999,999.99	99,999,999,999.999	\$999,999,999.99	9,999,999,999.999	9,999,999.999	\$9,999,999.99	XXXXXX	XXXXXX
XXXXXX	XXXXXXXXXXXXXX	9,999,999,999.999	\$999,999,999.99	99,999,999,999.999	\$999,999,999.99	9,999,999,999.999	9,999,999.999	\$9,999,999.99	XXXXXX	XXXXXX
XXXXXX	XXXXXXXXXXXXXX	9,999,999,999.999	\$999,999,999.99	99,999,999,999.999	\$999,999,999.99	9,999,999,999.999	9,999,999.999	\$9,999,999.99	XXXXXX	XXXXXX
XXXXXX	XXXXXXXXXXXXXX	9,999,999,999.999	\$999,999,999.99	99,999,999,999.999	\$999,999,999.99	9,999,999,999.999	9,999,999.999	\$9,999,999.99	XXXXXX	XXXXXX
XXXXXX	XXXXXXXXXXXXXX	9,999,999,999.999	\$999,999,999.99	99,999,999,999.999	\$999,999,999.99	9,999,999,999.999	9,999,999.999	\$9,999,999.99	XXXXXX	XXXXXX
SUB TOTALS		99,999,999,999.999		999,999,999,999.999		99,999,999,999.999		\$9,999,999,999.99		
		\$9,999,999,999.99		\$9,999,999,999.99		999,999,999,999.999				

NUMBER OF NDCS RESOLVED:	9,999
BALANCE DUE:	\$999,999,999.99
CREDIT DUE LABELER:	\$999,999,999.99

PLEASE REMIT TO THE FOLLOWING ADDRESS:

Alabama Medicaid Agency
 Attn: Drug Rebate/Accounts Receivable

Alabama Medicaid Agency
 501 Dexter Avenue
 P.O. Box 5624
 Montgomery, AL 36103-5624

REASON CODE	DESCRIPTION
XX	XX
XX	XX
XX	XX
XX	XX

RESOLUTION CODE	DESCRIPTION
XX	XX
XX	XX

7.31.3 RBT-5000-R -- Drug Rebate Resolution Statement Report Field Descriptions

Field	Description	Length	Data Type
Balance Due	Total amount of money owed by the labeler for the invoice period in question.	11	Number (Decimal)
Balance Due From Labeler	Represents the total re-calculated amount due from the labeler after subtracting any previous payment (Balance Due from Labeler = Balance of Units Due * Current Rebate Amount Claimed). This field can be either positive or negative.	9	Number (Decimal)
Balance of Units Due	Represents the number of units due from the labeler for a specific National Drug Code. (Balance of Units Due = State New Adjusted Units - Units Paid by Labeler). This field can be either positive or negative.	10	Number (Decimal)
Credit Due Labeler	Total amount of money owed to the labeler for the invoice period in question.	11	Number (Decimal)
Current Rebate Amount Claimed	Current rebate amount due from the manufacturer for the specified invoiced period. (Current Rebate Amount Claimed = Current Rebate Amount Per Unit * Total Units Reimbursed to Provider).	15	Number (Decimal)
Current Rebate Amount Per Unit	Current rebate amount per unit reported to Centers for Medicare and Medicaid Services (CMS) by the labeler and provided to each state.	12	Character
Description	Provides the labeler with an explanation of the reason or resolution code for the closed National Drug Codes (NDC) for the specified invoice period	100	Character
Invoice Period	Year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Labeler Code	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Labeler Name	Manufacturer labeler name as reported on the Drug Rebate address file provided by Centers for Medicare and Medicaid Services (CMS).	39	Character
NDC	The unique National Drug Code that identifies each drug. This field is comprised of the 4-digit product code, and the 2-digit package size code.	6	Character
Number of NDCs Resolved	Number of National Drug Codes (NDC) closed for the specified invoice period.	4	Number (Decimal)

Field	Description	Length	Data Type
Please Remit to the Following Address	Literal field used only if the balance due is a positive amount owed by the labeler.	37	Character
Reason Code	Displays all of the reason codes referenced in the report	2	Character
Rebate Amount Paid by Labeler	Total dollar amount paid by the labeler and dispositioned to the invoice detail, for the disputed National Drug Code (NDC) for the specified invoice period.	11	Number (Decimal)
Reso Code	Displays the resolution code(s) for the specified closed dispute.	5	Character
Resolution Code	Displays all of the resolution codes referenced in the report.	2	Character
Rsn Cde	Displays the dispute reason code(s) for the specified closed dispute.	5	Character
State Code	State abbreviation to indicate which state Health Coverage Program is billing the labeler.	2	Character
State New Adjusted Units	State New Adjusted Units are the new total number of units after the state has resolved (closed) the disputed National Drug Code (NDC) for a specified invoice period.	13	Number (Decimal)
Subtotals	Represents the total amount due for the following fields: Total Units Reimbursed to Provider, Current Rebate Amount Claimed, Units Paid by Labeler, Rebate Amount Paid by Labeler, State New Adjusted Units, Balance of Units Due and Balance Due from Labeler.	15	Number (Decimal)
Total Units Reimbursed to Provider	Displays the total number of units reimbursed to Providers for a National Drug Code (NDC) for the specified quarter. This field is populated with the number of units on the invoice detail when the dispute is opened each time.	13	Number (Decimal)
Units Paid by Labeler	Total number of units for which payment has been made by the labeler.	14	Number (Decimal)

7.32 RBT-5003-W -- Drug Rebate Recoupment Detail Report

7.32.1 RBT-5003-W -- Drug Rebate Recoupment Detail Report Narrative

The Drug Rebate Recoupment Detail report lists internal control numbers which have been recouped in the prior week, as a result of claim corrections. This report is sorted by Provider Number and Recipient Identification number. This report is produced weekly and can be emailed, printed or routed to FEITH.

7.32.2 RBT-5003-W -- Drug Rebate Recoupment Detail Report Layout

REPORT: RBT-5003-W		ALABAMA MEDICAID AGENCY						RUN DATE:		
MM/DD/CCYY								RUN TIME:		
PROCESS: RBTJM503		MEDICAID MANAGEMENT INFORMATION SYSTEM						PAGE:		
HH:MM:SS		DRUG REBATE RECOUPMENT DETAIL REPORT								
LOCATION: RBT5003W		REPORT DATE: MM/DD/CCYY								
1										
PROVIDER FINAL NUMBER DATE	RECIPIENT ID	ORIGINAL ICN	ADJUSTED ICN	NDC	DATE DISPENSED	RX NUMBER	ORIG ICN UNITS	ADJ ICN UNITS	LETTER DATE	RECOUP AMT
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
NPI XXXXXXXXXXXX MM/DD/CCYY	000000000000	999999999999	999999999999	9999999999	MM/DD/CCYY	9999999	999.99	999.99	MM/DD/CCYY	\$9,999.99
									SUB TOTAL:	\$9,999,999.99
									GRAND TOTAL:	\$9,999,999.99
** END OF REPORT **										

7.32.3 RBT-5003-W -- Drug Rebate Recoupment Detail Report Field Descriptions

Field	Description	Length	Data Type
Adj ICN Units	Adjusted internal control number units.	5	Number (Decimal)
Adjusted ICN	Adjusted internal control number; this is the unique identifier of the replacement claim.	13	Number (Integer)
Date Dispensed	Date drug dispensed.	8	Date (MM/DD/CCYY)
Final Date	Date the claim processed.	8	Date (MM/DD/CCYY)
Grand Total	Grand total of all recoupment amount.	8	Number (Decimal)
Letter Date	Date that the letter was sent.	8	Date (MM/DD/CCYY)
NDC	Unique National Drug Code that identifies each drug. This field is comprised of the five-digit labeler code, the four-digit product code, and the two-digit package size code.	11	Number (Integer)
Orig ICN Units	Original internal control number units.	5	Number (Decimal)
Original ICN	Original internal control number; this is the unique identifier of the claim.	13	Character
Provider Number	State Health Coverage Programs Provider Identification number.	15	Character
Provider ID Type	Provider's identification type.	3	Character
Recipient ID	Recipient identification number.	12	Character
Recoup Amt	Recoupment amount.	6	Number (Decimal)
RX Number	Pharmacy number.	7	Number (Integer)
Sub Total	Sub total by provider of amount.	9	Number (Decimal)

7.33 RBT-5004-Q -- Drug Rebate Recoupment Summary Report

7.33.1 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Narrative

The Drug Rebate Recoupment Summary report provides a summary of internal control numbers (ICN) recouped and listed on the RBT-5003-W report. This report is produced quarterly and can be emailed, printed, or routed to FEITH.

7.33.2 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Layout

PROVIDER NUMBER	ORIG ICN UNITS	ADJ ICN UNITS	RECOUP AMT
NPI 999999999999999X	999.999	999.999	\$999,999
**** JCODE **** NPI 999999999999999X	999.999	999.999	\$999,999
PHARMACY PROVIDER SUB TOTAL:			\$9,999,999.99
JCODE PROVIDER SUB TOTAL:			\$9,999,999.99
GRAND TOTAL:			\$9,999,999.99
** END OF REPORT **			

7.33.3 RBT-5004-Q -- Drug Rebate Recoupment Summary Report Field Descriptions

Field	Description	Length	Data Type
Adj ICN Units	Adjusted internal control number units.	6	Number (Decimal)
Grand Total	Grand total amount of recoupment for report summary.	9	Number (Decimal)
JCode Provider Sub Total	Total amount recouped from JCode provider.	9	Number (Decimal)
Orig ICN Units	Original internal control number units.	6	Number (Decimal)
Pharmacy Provider Sub Total	Total amount recouped from Pharmacy provider.	9	Number (Decimal)
Provider ID Type	This is the provider's identification type.	3	Character

Field	Description	Length	Data Type
Provider Number	State Health Coverage Programs provider identification number.	15	Character
Recoup Amt	Total amount of recoupment.	6	Number (Decimal)

7.34 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Report

7.34.1 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Narrative

The Drug Rebate Recoup Letters > Than 30 Days Old & No Response report lists providers that have not responded to letters within 30 days of the sent date. The letters requested additional documentation from the provider regarding specific ICNs. This report is produced weekly and can be emailed, printed, or routed to FEITH.

After viewing this report, the user may then update the letter status to 'No Response'. When this status or 'Ready for process/adjust' is entered, the user should adjust/void the associated ICNs using the Claims panels. After entry of these two statuses, the status is automatically updated to 'Adjusted', and letters are built notifying the providers that their claims have been adjusted.

7.34.2 RBT-5006-W -- Drug Rebate Recoup Letters > Than 30 Days Old & No Response Report Layout

PROVIDER NUMBER	LETTER ID	PROVIDER NAME	LETTER DATE
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
NPI 999999999	9999	XX	MM/DD/CCYY
		TOTAL PROVIDERS	999
** END OF REPORT **			

7.34.3 RBT-5006-W -- Drug Rebate Recoup Letters Greater Than 30 Days Old Report Field Descriptions

Field	Description	Length	Data Type
Letter Date	Date on which the letter was sent.	8	Date (MM/DD/CCYY)
Letter ID	Unique identification number assigned to a letter for a provider/same day scenario.	4	Number (Integer)
Provider ID Type	This is the provider's identification type.	3	Character
Provider Number	Provider number and service location code of the pharmacy or provider receiving the letter.	15	Character
Provider Name	Name of the provider.	50	Character
Total Providers	Total number of providers that have an outstanding notice.	3	Number (Integer)

7.35 RBT-9001-M -- Drug Rebate Outstanding Balance Summary - Federal Report

7.35.1 RBT-9001-M -- Drug Rebate Outstanding Balance Summary- Federal Report Narrative

The Drug Rebate Outstanding Balance Summary - Federal report provides a summary of outstanding balances per manufacturer per invoice period, as well as an accumulated total for all invoice periods. The cover letter and summary report are sent to labelers in an effort to collect outstanding balances that are over 68 days old. A copy of the cover letter and summary report will be sent as notification to CMS in the event of repeated delinquency. This report breaks on rebate program (e.g. Federal, State Supplemental). It can be emailed, printed, or routed to FEITH.

7.35.2 RBT-9001-M -- Drug Rebate Outstanding Balance Summary - Federal Report Layout

Drug Rebate Outstanding Balance Letter and Summary Rpt Report Layout

Report : RBT-9001-M	ALABAMA MEDICAID AGENCY							Run Date: MM/DD/CCYY		
Process : RETJML05	MEDICAID MANAGEMENT INFORMATION SYSTEM							Run Time: HH:MM:SS		
Location: RET9001M	DRUG REBATE OUTSTANDING BALANCE SUMMARY - FEDERAL							Page: 9999		
REPORT AS OF MM/DD/CCYY										
FOR LABELER: 99999										
INVOICE PERIOD	ORIGINAL AMOUNT INVOICED	REBATES COLLECTED	REBATE ADJUSTMENTS	REBATES WRITTEN-OFF	CURRENT REBATE AMOUNT DUE	INTEREST BILLED	INTEREST COLLECTED	INTEREST WRITTEN-OFF	INTEREST DUE	ENDING BALANCE
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
Q/CCYY	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99
TOTALS	\$999,999,999.99	\$999,999,999.99	\$99,999,999.99	\$999,999.99	\$999,999,99.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999.99	\$999,999,999.99

** END OF REPORT **

7.35.3 RBT-9001-M -- Drug Rebate Outstanding Balance Letter and Summary - Federal Report Field Descriptions

Field	Description	Length	Data Type
Current Rebate Amount Due	Rebate amount that is still outstanding for the invoice.	10	Number (Decimal)
Ending Balance	Sum of Current Rebate Amount Due + Interest Due.	11	Number (Decimal)
For Labeler	Unique five-digit code that identifies each drug manufacturer's labeler number. This number represents the first five digits of the National Drug Code (NDC).	5	Character
Interest Billed	Interest amount billed for the invoice.	8	Number (Decimal)
Interest Collected	Total dollar amount of interest applied to the drug rebate quarterly invoice during the reporting period.	8	Number (Decimal)
Interest Due	Interest amount that is still outstanding for the invoice.	8	Number (Decimal)
Interest Written-Off	Interest amount that has been written-off.	8	Number (Decimal)
Invoice Period	Year and quarter of the invoice. This field displays the date in Q/CCYY format where Q indicates the quarter. Valid values for the quarter are 1-4.	5	Date (Q/CCYY)
Original Amount Invoiced	Represents the original invoice billed amount.	11	Number (Decimal)
Rebate Adjustments	Represents the adjusted dollar amount from the original invoice amount as a result of a rebate amount per unit change, resolved dispute or utilization adjustment that increases or decrease an outstanding or credit balance for the specified quarter.	10	Number (Decimal)
Rebates Collected	Represents the total dollar amount applied to the drug rebate quarterly invoice during the reporting period. This amount contains interest payments and credit amounts resulting from an overpayment that has been re-applied to another invoice.	11	Number (Decimal)
Rebates Written Off	Total dollar amount that will not be collected that has been written off.	8	Number (Decimal)
Report As Of	Date the report was created.	8	Date (MM/DD/CCYY)

Field	Description	Length	Data Type
Totals	Summarizes the collection activity totals for each labeler.	11	Number (Decimal)