

**IOWA Retail Pharmacy Reporting Only**

Only information about Iowa Retail pharmacies are included on this tab. All other claims included on **All\_Other\_Pharmacies** tab.

Pharmacy Benefits Manager Company Name	Prescription claim date	Quantity of the Drug Dispensed (expressed in metric decimal units)	Amount the Pharmacy was Reimbursed \$ (per Unit)	NADAC per unit \$ (from CMS survey report as provided by the OIC)	NADAC Report Date (date of the CMS Report used to determine the "NADAC" rate)	Affiliate Pharmacy (Yes / No)	Dispensed Pursuant to Government Health Plan (Yes / No)
Kroger Prescription Plans, Inc.	2/4/2026	2.5	\$2.79	\$1.81	1/28/2026	N	N
	1/26/2026	90	\$0.08	\$0.05	1/21/2026	N	N
	1/7/2026	60	\$0.18	\$0.13	12/31/2025	N	N
	3/4/2026	30	\$0.15	\$0.09	2/25/2026	N	N
	1/7/2026	90	\$0.18	\$0.09	12/31/2025	N	N
	1/7/2026	180	\$0.08	\$0.02	12/31/2025	N	N
	2/4/2026	30	\$0.11	\$0.03	1/28/2026	N	N
	1/26/2026	42.5	\$0.55	\$0.42	1/21/2026	N	N
	2/12/2026	90	\$0.14	\$0.09	2/11/2026	N	N
	3/4/2026	30	\$0.07	\$0.05	2/25/2026	N	N
	3/24/2026	14	\$0.55	\$0.33	3/18/2026	N	N
	1/7/2026	90	\$0.08	\$0.05	12/31/2025	N	N
	1/7/2026	90	\$0.09	\$0.03	12/31/2025	N	N
	2/12/2026	90	\$0.20	\$0.13	2/11/2026	N	N
	3/4/2026	60	\$0.55	\$0.37	2/25/2026	N	N
	1/7/2026	90	\$0.06	\$0.03	12/31/2025	N	N