



## West Virginia Offices of the Insurance Commissioner

### West Virginia NADAC Quarterly Report 2023 Q1

Company Name:		Applied Underwriters, Inc.							
SBS Number:		515536312							
Drug NDC Number (complete 11 digit number)	Drug Name (the complete NDC Description)	Date the Drug was Dispensed (Fill Date)	Quantity of the Drug Dispensed (expressed in metric decimal units)	Amount the Pharmacy was Reimbursed (per Unit or Dosage) & includes member cost-sharing	Average NADAC (from CMS survey report as provided by the OIC)	Average NADAC Report Date (date of the CMS Report used to to determine the "Average NADAC" rate)	Actual Percentage of NADAC Reimbursement	Affiliate Pharmacy (Yes / No)	Dispensed pursuant state or local government health plan (Yes / No)
59651036205	Ibuprofen 800mg Tablets	1/2/2023	60	4.38	0.07292	12/21/2022	0.001097093	No	No
63304069301	Clindamycin 300mg Capsules	2/1/2023	21	22.17	0.25455	1/18/2023	3.147374919	No	No
59651036205	Ibuprofen 800mg Tablets	2/1/2023	20	1.45	0.07258	1/18/2023	-0.001102232	No	No
59651036205	Ibuprofen 800mg Tablets	2/10/2023	90	17.51	0.07258	1/18/2023	1.680567037	No	No
59651036205	Ibuprofen 800mg Tablets	3/8/2023	30	2.24	0.07470	2/22/2023	-0.000446229	No	No
00115174801	Metaxalone 800mg Tablets	3/22/2023	21	66.76	0.60997	2/22/2023	4.211809792	No	No
31722054301	Indomethacin 500mg Capsules	3/22/2023	30	3.64	0.12124	2/22/2023	0.000769823	No	No
00115174801	Metaxalone 800mg Tablets	3/29/2023	21	66.76	0.46208	3/22/2023	5.879864134	No	No



## West Virginia Offices of the Insurance Commissioner

### West Virginia NADAC Quarterly Report 2022 Q4

Company Name:		Applied Underwriters, Inc.							
SBS Number:		515536312							
Drug NDC Number (complete 11 digit number)	Drug Name (the complete NDC Description)	Date the Drug was Dispensed (Fill Date)	Quantity of the Drug Dispensed (expressed in metric decimal units)	Amount the Pharmacy was Reimbursed (per Unit or Dosage) & includes member cost-sharing	Average NADAC (from CMS survey report as provided by the OIC)	Average NADAC Report Date (date of the CMS Report used to to determine the "Average NADAC" rate)	Actual Percentage of NADAC Reimbursement	Affiliate Pharmacy (Yes / No)	Dispensed pursuant state or local government health plan (Yes / No)
59651036205	Ibuprofen 800mg Tablets	10/29/2022	60	4.41	0.07346	10/16/2022	0.000544514	No	No
59651036205	Ibuprofen 800mg Tablets	11/26/2022	60	4.39	0.07314	11/23/2022	0.000364598	No	No
65862042005	Sulfamethoxazole-Trimethoprim 800-160mg	12/30/2022	20	1.24	0.06203	11/23/2022	-0.000483637	No	No
59651036205	Ibuprofen 800mg Tablets	12/30/2022	90	17.51	0.07292	11/23/2022	1.668068507	No	No



## West Virginia Offices of the Insurance Commissioner

### West Virginia NADAC Quarterly Report 2022 Q3

Company Name:		Applied Underwriters, Inc.							
SBS Number:		515536312							
Drug NDC Number (complete 11 digit number)	Drug Name (the complete NDC Description)	Date the Drug was Dispensed (Fill Date)	Quantity of the Drug Dispensed (expressed in metric decimal units)	Amount the Pharmacy was Reimbursed (per Unit or Dosage) & includes member cost-sharing	Average NADAC (from CMS survey report as provided by the OIC)	Average NADAC Report Date (date of the CMS Report used to to determine the "Average NADAC" rate)	Actual Percentage of NADAC Reimbursement	Affiliate Pharmacy (Yes / No)	Dispensed pursuant state or local government health plan (Yes / No)
59651036205	Ibuprofen 800mg Tablets	9/23/2022	60	4.29	0.07146	9/21/2022	0.000559754	No	No