Exhibit I.Y.2

DCS and NYSIF Prescription Drug Programs
File Layout Specifications for the Offeror's Proposed Retail Pharmacy Network File

Amended July 31, 2017
Instructions: Utilize this file layout to prepare Exhibit I.Y.1 of your technical proposal and submit on a CD. Please prepare three separate exhibits (one for the DCS Commercial Program, one for the DCS EGWP, and one for the NYSIF Program). Each file must include each pharmacy that you have an executed contract with for participation in the Empire Plan Retail Pharmacy Network commencing on January 1, 2019. The pharmacies listed in this file must be included in the Retail Pharmacy Network implemented for the Program on 1/1/19 in accordance with Section IV.B.3.2(a) "Implementation" and Section IV.B.10 "Retail Pharmacy Network" of this RFP.

1) The Pharmacy Corporate ID is a number that represents a unique identifier of the contracting or bargaining entity. Place this identifier in the Pharmacy Corporate ID column for each pharmacy included in this file.

2) The Contracting Entity Name is the name of the contracting or bargaining entity that corresponds to the pharmacy corporate ID. Include the contracting entity name for each pharmacy listed in this file in the Contracting Entity Name column.

3) The Provider ID# or NCPDP# is a unique pharmacy identifier. Enter the number for each pharmacy included in this file in the NCPDP or Provider ID# Column below.

4) Include the Pharmacy Name, Street Address, City, State and five-digit zip code for each pharmacy listed in this file.

Pharmacy Corporate ID	Contracting Entity Name	NCPDP# or Provider ID#	Pharmacy Name	Street Address	City	State	Zip Code (five-digit) only