Empire Plan Prescription Drug Program

Quarterly Rebate and Other Pharma Revenue Report - Manufacturer Detail For the quarter ending ____; Collections through ___

Quarter	Rebate ID	RAC	RAC Type	Manufacturer Name	NDC ID	NDC Brand Name	Original Invoiced Rebates and Fees	Invoice Adjustments	Adjusted Invoiced Rebates and Fees	Rebates and Fees Collected to Date	Percent Collected to Date	Remaining Open Collections

Empire Plan Prescription Drug Program

Quarterly Rebate and Other Pharma Revenue Report - Manufacturer Detail For the quarter ending ____; Collections through ____

Quarter	Rebate ID	Client	RAC	RAC Type	Client Share of Invoiced	Client Share of Collections	Submitted Rx	Rate	Guarantee	Previously Paid	Current Amount Due