

# Medicaid Managed Care Quarterly Transparency Report

*State Fiscal Year 2026 – Quarter 1*

*Response to Act 482 of the 2018 Regular Legislative Session*

*Prepared by:*

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## Introduction

This report is submitted in response to Act 482 of the 2018 Regular Legislative Session. The report contains the requested data on the Medicaid expansion population and managed care organization (MCO) pharmacy benefit managers (PBM). As part of the Medicaid Managed Care Transparency Report, this report includes those expansion population counts and expenditures for individuals enrolled in an MCO for either full or partial benefits. The report will be produced quarterly according to the following schedule:

<b>State Fiscal Year Quarter</b>	<b>Months Reported</b>	<b>Report Issue Date</b>
<b>Q1</b>	July, August, September	January
<b>Q2</b>	October, November, December	April
<b>Q3</b>	January, February, March	July
<b>Q4</b>	April, May, June	October

Each quarterly report will provide monthly data for the reporting period and unduplicated year-to-date (YTD) totals for the 2026 state fiscal year (SFY). The annual Medicaid Managed Care Transparency Report will include a collective chart of the data submitted in each quarterly report.

All data reported will be current as of the report's run date; however, some data may change over time due to the dynamic nature of Medicaid enrollment and claims processing. Claims data will be reported based on the date of payment, rather than the date of service, consistent with Senate Resolution 163 of the 2017 Regular Legislative Session. This approach stabilizes the data by accounting for claims lag in subsequent reports for the same period. Enrollment data presented each quarter may vary from data reported in the annual summary due to retroactive enrollment.

## Acronyms Used in This Report

This report uses several acronyms to present data. These acronyms are given below:

### Managed Care Organizations

ABH	Aetna Better Health
ACLA	AmeriHealth Caritas of Louisiana
HBL	Healthy Blue Louisiana
HHH	Humana Healthy Horizons
LHCC	Louisiana Healthcare Connections
UHC	United Healthcare Community Plan

### Other Acronyms

CMS	Centers for Medicare & Medicaid Services	MCO	Managed Care Organization
DBPM	Dental Benefits Plan Manager	MMIS	Medicaid Management Information System
DOP	Date of Payment	NEMT	Non-Emergency Medical Transportation
DOS	Date of Service	PBM	Pharmacy Benefit Manager
DQ	DentaQuest USA Insurance Company, Inc.	PDL	Preferred Drug List
ED	Emergency Department	SFY	State Fiscal Year
MCIP	Managed Care Incentive Program	YTD	Year to Date
MCNA	Managed Care of North America, Inc.		

## Louisiana Medicaid Expansion Population

Louisiana provides Medicaid coverage under the Affordable Care Act to adults ages 19 through 64 with income under 138% of the federal poverty level. Most members of the expansion group receive full Medicaid coverage through enrollment in one of six contracted Medicaid MCOs. Each month, fewer than 1% of expansion enrollees are enrolled in cases such as incarceration or enrollment in Medicare, which may require a period of coverage for some services under fee-for-service (FFS) plans. Non-managed care data for these cases are not included in this report.

### Expansion Enrollment by Age Cohort and MCO

From July 1, 2025, through September 30, 2025, a total of 512,934 unique expansion members were enrolled in an MCO. Table 1 presents a breakdown of enrollees by age, MCO, and month. Totals for each MCO and the fiscal YTD are unduplicated and may not equal the sum of counts by MCO or by month.

**Table 1: Expansion Enrollment by Age Cohort and MCO, SFY 2026 Quarter 1**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
<b>July-2025</b>							
Ages 19 to 49	49,166	38,256	78,823	33,282	95,299	91,197	386,023
Ages 50 to 64	15,102	9,913	21,237	9,629	21,260	24,282	101,423
<b>TOTAL</b>	64,268	48,169	100,060	42,911	116,559	115,479	487,446
<b>August-2025</b>							
Ages 19 to 49	48,580	37,691	77,598	32,930	94,017	89,977	380,793
Ages 50 to 64	14,967	9,774	21,075	9,508	21,018	24,060	100,402
<b>TOTAL</b>	63,547	47,465	98,673	42,438	115,035	114,037	481,195
<b>September-2025</b>							
Ages 19 to 49	48,449	37,387	76,978	32,871	93,459	89,291	378,435
Ages 50 to 64	14,840	9,655	20,814	9,522	20,727	23,758	99,316
<b>TOTAL</b>	63,289	47,042	97,792	42,393	114,186	113,049	477,751
<b>SFY 2026 Q1 Total</b>							
Ages 19 to 49	52,554	40,571	83,402	35,829	100,624	96,331	407,657
Ages 50 to 64	16,023	10,461	22,376	10,356	22,279	25,519	106,662
<b>TOTAL</b>	68,373	50,910	105,494	46,060	122,580	121,526	512,934
<b>SFY 2026 YTD<sup>1</sup></b>	68,373	50,910	105,494	46,060	122,580	121,526	512,934

Source: MARS Data Warehouse, data extracted on 11/07/2025

<sup>1</sup> Quarterly totals and YTD totals are unduplicated and may not equal the sum of individual cells due to duplication across months and MCOs.

## Expansion Enrollees with Earned Income

Table 2 presents the number of expansion enrollees in each MCO with earned income. Approximately 58% of the expansion population for Quarter 1 reported having earned income. This group may include individuals with a disability or other persons identified per CMS guidance whose ability to work may be limited, such as students and individuals with complex medical conditions.

**Table 2: Unduplicated Expansion Enrollees with Earned Income by Age Cohort and MCO, SFY 2026 Quarter 1**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
<b>July-2025</b>							
Ages 19 to 49	28,385	25,729	46,797	19,437	58,607	55,372	234,327
Ages 50 to 64	6,046	4,255	8,631	3,587	8,989	10,091	41,599
Total	34,431	29,984	55,428	23,024	67,596	65,463	275,926
<b>August-2025</b>							
Ages 19 to 49	29,480	25,573	46,320	20,507	58,005	54,778	234,663
Ages 50 to 64	6,114	4,214	8,664	3,694	8,986	10,069	41,741
Total	35,594	29,787	54,984	24,201	66,991	64,847	276,404
<b>September-2025</b>							
Ages 19 to 49	29,051	25,560	45,126	20,132	57,059	53,981	230,909
Ages 50 to 64	6,012	4,124	8,452	3,631	8,822	9,863	40,904
Total	35,063	29,684	53,578	23,763	65,881	63,844	271,813
<b>SFY 2026 Q1 Total</b>							
Ages 19 to 49	34,021	29,736	52,589	23,436	65,286	61,946	252,705
Ages 50 to 64	6,935	4,779	9,682	4,231	10,012	11,210	45,314
Total	40,871	34,456	62,138	27,613	75,133	73,001	297,366
<b>SFY 2026 YTD</b>	<b>40,871</b>	<b>34,456</b>	<b>62,138</b>	<b>27,613</b>	<b>75,133</b>	<b>73,001</b>	<b>297,366</b>

Source: Medicaid Eligibility Data System, data extracted on 11/07/2025.

## Expansion Per Member Per Month Payments

In the first quarter of SFY 2026, the six MCOs received total payments of \$1,050,072,023 to manage the care of individuals in the expansion population. These payments covered medical, specialized behavioral health, pharmacy, and transportation services. Table 3 shows the total monthly payments made to each MCO for their expansion cohorts.

**Table 3: Total Payments to MCOs for the Expansion Population, SFY 2026 Quarter 1**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
<b>Jul-2025<sup>2</sup></b>	\$62,677,159	\$44,271,352	\$94,103,405	\$33,467,112	\$103,098,646	\$108,604,202	\$446,221,876
<b>Aug-2025<sup>3</sup></b>	\$40,514,628	\$28,618,590	\$60,830,268	\$21,634,666	\$66,647,854	\$70,205,894	\$288,451,899
<b>Sep-2025<sup>4</sup></b>	\$44,303,914	\$31,291,593	\$66,515,628	\$23,654,577	\$72,869,934	\$76,762,602	\$315,398,248
<b>SFY 2026 Q1</b>	\$147,495,702	\$104,181,535	\$221,449,300	\$78,756,354	\$242,616,434	\$255,572,698	\$1,050,072,023
<b>SFY 2026 YTD</b>	\$147,495,702	\$104,181,535	\$221,449,300	\$78,756,354	\$242,616,434	\$255,572,698	\$1,050,072,023

Source: ISIS/CP-012 extracted on 11/12/2025 and MARS Data Warehouse, data extracted on 11/07/2025.

Effective January 1, 2021, the Louisiana Department of Health contracted with DentaQuest (DQ) and MCNA Dental to administer dental benefits for qualified Medicaid enrollees, including those in the expansion population. Expansion enrollees ages 19 and 20 are eligible for all Medicaid-covered dental services. Enrollees aged 21 years and over are eligible for covered denture services only. Table 4 provides total payments for dental benefits by month of payment, along with a quarterly summation and the YTD total.

**Table 4: Total Payments for Dental Benefits for the Expansion Population, SFY 2026 Quarter 1**

	DentaQuest	MCNA	TOTAL
<b>Jul-2025<sup>5</sup></b>	\$676,333	\$624,307	\$1,300,640
<b>Aug-2025<sup>6</sup></b>	\$669,604	\$618,096	\$1,287,699
<b>Sep-2025<sup>7</sup></b>	\$668,314	\$616,905	\$1,285,219
<b>SFY 2026 Q1</b>	\$2,014,250	\$1,859,308	\$3,873,558
<b>SFY 2026 YTD</b>	\$2,014,250	\$1,859,308	\$3,873,558

Source: ISIS/CP-012 received on 02/10/2026 and MARS Data Warehouse, data extracted on 11/07/2025.

## Medicaid Expansion Population Service Utilization

This section compares specified service utilization between the expansion and non-expansion populations by age cohort. The expansion population covers adults ages 19 to 64 with a household income below than 138% of the federal poverty level who do not meet other Medicaid eligibility criteria

<sup>2</sup> Jul 25: Jan-Feb 2025 Per member per month (PMPMs) paid and previous lump sums recouped. Kicks for Jan-May paid and previous lump sums recouped.

<sup>3</sup> Aug 25: Mar-May 2025 PMPMS paid and previous lump sums recouped. July Date of Service (DOS) PMPMs paid via lump sum pending approval of 7/1/25 rates. Also includes Managed Care Incentive Program (MCIP) expenditures of \$53.4million.

<sup>4</sup> Sep 25: Aug DOS PMPMs paid via lump sum pending approval of 7/1/25 rates.

<sup>5</sup> Jul 25: July DOS PMPMs paid via lump sum pending approval of 7/1/25 rates.

<sup>6</sup> Aug 25: Aug DOS PMPMs paid via lump sum pending approval of 7/1/25 rates.

<sup>7</sup> Sep 25: Sep DOS PMPMs paid via lump sum pending approval of 7/1/25 rates.

(Aged, Blind, Child-related, Disabled) and who are not eligible for or enrolled in Medicare. The non-expansion population includes all other Medicaid eligibility groups.

The number of enrollees is unduplicated within each service category and reporting period and may not represent the total number of enrollees who receive services each month. Total MCO expenditures within these reporting categories in Quarter 1 were \$880,603,130 for the expansion population and \$856,870,816 for the non-expansion population. These amounts include claims payments made to providers by the MCOs and exclude payments made under the FFS program. Approximately 51% of total payments by MCOs to providers for the six categories of service (ED, Hospital Inpatient, Hospital Outpatient, NEMT, Pharmacy, and Physician services) were attributed to utilization by the expansion population.

**Table 5a: ED<sup>8</sup> Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	32,410	33,958	49,968	85,726	0.0%
	Payments	\$0	\$0	\$0	\$0	\$8,569,493	\$8,964,284	\$13,629,683	\$31,163,461	0.0%
19 to 49	Enrollees	40,214	39,349	46,130	84,597	14,025	13,828	16,377	28,997	74.5%
	Payments	\$11,281,264	\$11,361,903	\$13,831,048	\$36,474,216	\$4,200,186	\$4,239,981	\$5,369,116	\$13,809,283	72.5%
50 to 64	Enrollees	10,304	9,883	11,535	21,236	5,175	4,966	5,905	9,906	68.2%
	Payments	\$3,141,507	\$2,960,860	\$3,655,357	\$9,757,724	\$1,820,615	\$1,747,807	\$2,188,641	\$5,757,063	62.9%
65+	Enrollees	0	0	0	0	266	230	283	517	0.0%
	Payments	\$0	\$0	\$0	\$0	\$97,061	\$88,230	\$103,521	\$288,812	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

<sup>8</sup> Emergency department (ED) includes facility payments only. ED associated payments for physician services are included in table 5f.

**Table 5b: Hospital Inpatient Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	4,377	4,403	4,578	12,456	0.0%
	Payments	\$0	\$0	\$0	\$0	\$33,460,632	\$32,442,949	\$34,300,798	\$100,204,379	0.0%
19 to 49	Enrollees	4,386	4,262	4,198	11,285	2,863	2,922	2,918	7,840	59.0%
	Payments	\$31,197,525	\$30,318,968	\$31,025,255	\$92,541,748	\$17,132,275	\$16,456,367	\$17,425,425	\$51,014,067	64.5%
50 to 64	Enrollees	1,540	1,499	1,488	3,844	1,008	998	952	2,381	61.8%
	Payments	\$16,661,697	\$15,042,715	\$16,735,707	\$48,440,119	\$10,566,855	\$9,870,226	\$10,540,201	\$30,977,281	61.0%
65+	Enrollees	0	0	0	0	81	59	69	171	0.0%
	Payments	\$0	\$0	\$0	\$0	\$780,916	\$931,418	\$1,033,556	\$2,745,890	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

**Table 5c: Hospital Outpatient Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	61,290	67,694	72,927	150,721	0.0%
	Payments	\$0	\$0	\$0	\$0	\$21,750,192	\$20,729,455	\$19,904,211	\$62,383,858	0.0%
19 to 49	Enrollees	65,452	66,205	64,018	132,148	25,217	25,247	24,937	47,649	73.5%
	Payments	\$34,338,693	\$32,182,741	\$31,313,128	\$97,834,562	\$14,304,126	\$13,272,290	\$12,988,762	\$40,565,178	70.7%
50 to 64	Enrollees	26,818	27,536	26,462	49,505	11,036	11,298	11,005	19,210	72.0%
	Payments	\$23,376,438	\$20,594,798	\$19,288,470	\$63,259,706	\$12,584,794	\$11,359,562	\$10,706,035	\$34,650,391	64.6%
65+	Enrollees	0	0	0	0	648	707	704	1,234	0.0%
	Payments	\$0	\$0	\$0	\$0	\$820,611	\$726,938	\$780,144	\$2,327,693	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

**Table 5d: NEMT Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	1,758	2,521	1,981	4,476	0.0%
	Payments	\$0	\$0	\$0	\$0	\$282,344	\$429,399	\$312,328	\$1,024,072	0.0%
19 to 49	Enrollees	4,063	5,017	4,356	8,223	2,930	3,492	3,165	5,309	60.8%
	Payments	\$1,248,722	\$1,748,891	\$1,278,566	\$4,276,179	\$847,479	\$1,140,986	\$874,608	\$2,863,073	59.9%
50 to 64	Enrollees	2,272	2,831	2,496	4,317	3,734	4,346	3,847	6,134	41.3%
	Payments	\$581,921	\$810,730	\$615,807	\$2,008,457	\$1,017,622	\$1,380,411	\$1,051,435	\$3,449,468	36.8%
65+	Enrollees	0	0	0	0	1,822	2,112	1,873	2,986	0.0%
	Payments	\$0	\$0	\$0	\$0	\$506,999	\$690,105	\$558,043	\$1,755,148	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

**Table 5e: Pharmacy Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	141,486	130,316	187,720	278,637	0.0%
	Payments	\$0	\$0	\$0	\$0	\$42,045,558	\$34,724,595	\$45,412,985	\$122,183,137	0.0%
19 to 49	Enrollees	158,702	141,768	160,128	218,531	51,850	46,432	52,826	71,782	75.3%
	Payments	\$98,239,378	\$75,923,807	\$98,040,670	\$272,203,856	\$40,094,172	\$29,777,669	\$40,935,206	\$110,807,046	71.1%
50 to 64	Enrollees	66,321	61,736	65,436	78,231	25,429	24,171	25,441	28,808	73.1%
	Payments	\$53,506,249	\$40,908,926	\$53,869,615	\$148,284,791	\$30,879,128	\$23,921,299	\$31,947,702	\$86,748,129	63.1%
65+	Enrollees	0	0	0	0	1,673	1,551	1,700	2,047	0.0%
	Payments	\$0	\$0	\$0	\$0	\$1,134,064	\$884,350	\$1,227,785	\$3,246,199	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

**Table 5f: Physician<sup>9</sup> Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2026 Quarter 1**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		July 2025	August 2025	September 2025	Q1 TOTAL	July 2025	August 2025	September 2025	Q1 TOTAL	
0 to 18	Enrollees	0	0	0	0	142,811	154,406	204,651	310,263	0.0%
	Payments	\$0	\$0	\$0	\$0	\$28,905,618	\$25,434,676	\$45,769,550	\$100,109,844	0.0%
19 to 49	Enrollees	112,109	108,834	112,071	189,178	41,556	41,010	40,943	66,512	74.0%
	Payments	\$24,026,941	\$17,015,280	\$28,958,868	\$70,001,089	\$10,032,212	\$7,426,083	\$13,162,538	\$30,620,832	69.6%
50 to 64	Enrollees	40,986	39,988	42,663	65,082	16,105	16,099	16,901	24,295	72.8%
	Payments	\$11,401,023	\$8,263,917	\$15,855,742	\$35,520,683	\$5,506,061	\$3,986,854	\$7,758,378	\$17,251,293	67.3%
65+	Enrollees	0	0	0	0	1,049	1,076	1,098	1,735	0.0%
	Payments	\$0	\$0	\$0	\$0	\$315,161	\$227,062	\$382,995	\$925,218	0.0%

Source: MARS Data Warehouse, data extracted on 11/07/2025.

<sup>9</sup> Includes both emergency and non-emergency services.

## Pharmacy Benefit Managers (PBM)

Act 482 of the 2018 Regular Legislative Session requires the reporting of the following information regarding the MCO's PBM:

- (a) The name of each PBM, identified as contracted or owned by the MCO, and
- (b) Whether the PBM is a subsidiary of the parent company of the MCO.

In accordance with LDH requirements, each MCO individually contracts with Prime Therapeutics State Government Solutions, LLC (Prime) to provide PBM services for its Louisiana Medicaid members. This structure remains in effect through Quarter 1 of SFY 2025-2026. Prime is not a subsidiary of the parent company of any of the six current MCOs.

### PBM Revenue Streams

In advance of the statutory deadline established by Act 482 of the 2018 Regular Legislative Session, MCO contracts were amended to implement changes in the managed care pharmacy program that affect the data presented in this section. Effective May 1, 2019, these changes limited contracts for PBM services to a transaction fee, based on a set rate established by LDH. The current maximum rate set by the Department is \$1.25 per processed claim.

With the implementation of a single preferred drug list (PDL), PBMs are no longer allowed to enter into supplemental rebate agreements for drugs included in the single PDL, or to engage in spread pricing. For dates of services on and after May 1, 2019, MCOs and PBMs may collect rebates on items not included in the single PDL, such as diabetes testing supplies.

Table 6 presents monthly revenues paid to the PBM for management of the MCO's pharmacy benefit, including any rebates earned and retained by either the PBM or the MCO for items not included on the single PDL. All amounts are reported on a cash basis in the month received or remitted. The period for collecting rebates by the PBM and remitting them to the MCO varies across plans, with some occurring monthly and others quarterly. Rebates collected on items not included in the single PDL by the PBM or MCO are not remitted to the Department; however, these amounts are used by the actuary as a reduction in net pharmacy costs in the calculation of capitation rates. A quarterly and year-to-date summary is provided in Table 7.

**Table 6: MCO PBM Revenues by Month, SFY 2026 Quarter 1<sup>10</sup>**

	ABH	ACLA	HBL	HHH	LHCC	UHC
<b>July 2025</b>						
Transaction Fees Paid by MCO to PBM	\$182,365	\$150,505	\$297,198	\$80,651	\$388,834	\$676,173
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$0	\$0	\$0	\$0
Rebates and Discounts Collected by the MCO or PBM and Remitted to LDH	\$0	\$0	\$0	\$0	\$0	\$0
Amount Retained by the PBM through Spread Pricing	\$0	\$0	\$0	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>August 2025</b>						
Transaction Fees Paid by MCO to PBM	\$139,707	\$234,577	\$465,959	\$61,816	\$297,166	\$309,940
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$0	\$0	\$0	\$0
Rebates and Discounts Collected by the MCO or PBM and Remitted to LDH	\$0	\$0	\$0	\$0	\$0	\$0
Amount Retained by the PBM through Spread Pricing	\$0	\$0	\$0	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>September 2025</b>						
Transaction Fees Paid by MCO to PBM	\$145,111	\$0	-\$1	\$65,670	\$314,294	\$0
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$112	\$0	\$0	\$0
Rebates and Discounts Collected by the MCO or PBM and Remitted to LDH	\$0	\$0	\$0	\$0	\$0	\$0
Amount Retained by the PBM through Spread Pricing	\$0	\$0	\$0	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0

Source: MCO self-reported, Report 054, template accessible at <https://ldh.la.gov/medicaid/mco-resources>

<sup>10</sup> May contain small amounts from prior contracted PBM due to adjustments.

**Table 7: MCO PBM revenues quarterly and year to-date summary, SFY 2026**

	ABH	ACLA	HBL	HHH	LHCC	UHC
<b>Quarter 1 Totals (July 2025 - September 2025)</b>						
Transaction Fees Paid by MCO to PBM	\$467,183	\$385,082	\$763,156	\$208,137	\$1,000,294	\$986,113
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$112	\$0	\$0	\$0
Rebates and Discounts Collected by the MCO or PBM and Remitted to LDH	\$0	\$0	\$0	\$0	\$0	\$0
Amount Retained by the PBM through Spread Pricing	\$0	\$0	\$0	\$0	\$0	\$0
Any Other Monies Retained by the PBM That Are Not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>SFY YTD (July 2025 - September 2025)</b>						
Transaction Fees Paid by MCO to PBM	\$467,183	\$385,082	\$763,156	\$208,137	\$1,000,294	\$986,113
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$112	\$0	\$0	\$0
Rebates and Discounts Collected by the MCO or PBM and Remitted to LDH	\$0	\$0	\$0	\$0	\$0	\$0
Amount Retained by the PBM through Spread Pricing	\$0	\$0	\$0	\$0	\$0	\$0
Any Other Monies Retained by the PBM That Are Not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0

Source: MCO self-reported, Report 054, template accessible at <https://dh.la.gov/medicaid/mco-resources>

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