

# Medicaid Managed Care Quarterly Transparency Report

*State Fiscal Year 2025 – Quarter 4*

*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 2025 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 also 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
HHH	Humana Healthy Horizons
LHCC	Louisiana Healthcare Connections
UHC	United Healthcare Community Plan

### **Other Acronyms**

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

## 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 April 1, 2025, through June 30, 2025, a total of 542,538 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 2025 Quarter 4**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
April-2025							
Ages 19 to 49	51,883	41,352	84,476	35,508	101,448	96,807	411,474
Ages 50 to 64	15,842	10,593	22,772	10,316	22,710	25,793	108,026
<b>TOTAL</b>	67,725	51,945	107,248	45,824	124,158	122,600	519,500
May-2025							
Ages 19 to 49	51,274	40,571	82,955	34,964	99,786	95,179	404,729
Ages 50 to 64	15,638	10,375	22,308	10,141	22,251	25,359	106,072
<b>TOTAL</b>	66,912	50,946	105,263	45,105	122,037	120,538	510,801
June-2025							
Ages 19 to 49	50,355	39,402	80,788	34,128	97,636	93,258	395,567
Ages 50 to 64	15,310	10,090	21,731	9,905	21,740	24,774	103,550
<b>TOTAL</b>	65,665	49,492	102,519	44,033	119,376	118,032	499,117
SFY 2025 Q4 Total							
Ages 19 to 49	54,981	43,333	88,618	37,641	106,277	101,608	430,948
Ages 50 to 64	16,708	11,088	23,825	10,963	23,617	26,918	112,766
<b>TOTAL</b>	71,505	54,321	112,205	48,481	129,644	128,248	542,538
<b>SFY 2025 YTD<sup>1</sup></b>	90,417	71,513	144,035	64,898	169,623	163,979	674,483

Source: MARS Data Warehouse, data extracted on 08/17/2025

<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 who reported earned income. Approximately 58% of the expansion population for Quarter 4 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 2025 Quarter 4**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
April-2025							
Ages 19 to 49	33,183	29,601	48,685	22,705	60,913	57,704	252,791
Ages 50 to 64	6,600	4,655	9,153	3,997	9,560	10,654	44,619
Total	39,783	34,256	57,838	26,702	70,473	68,358	297,410
May-2025							
Ages 19 to 49	30,664	27,939	49,572	20,791	61,789	58,205	248,960
Ages 50 to 64	6,330	4,460	9,109	3,793	9,528	10,642	43,862
Total	36,994	32,399	58,681	24,584	71,317	68,847	292,822
June-2025							
Ages 19 to 49	29,792	27,563	48,806	20,176	60,751	57,565	244,653
Ages 50 to 64	6,219	4,409	8,942	3,757	9,338	10,414	43,079
Total	36,011	31,972	57,748	23,933	70,089	67,979	287,732
SFY 2025 Q4 Total							
Ages 19 to 49	37,158	32,887	55,991	25,271	69,062	65,523	268,680
Ages 50 to 64	7,353	5,159	10,211	4,459	10,581	11,854	47,792
Total	44,435	37,997	66,085	29,683	79,508	77,248	315,917
SFY 2025 YTD	61,582	54,917	93,286	42,906	113,956	108,925	423,441

Source: Medicaid Eligibility Data System, data extracted on 08/16/2025.

## Expansion Per Member Per Month (PMPM) Payments

In the fourth quarter of SFY 2025, the six MCOs received total payments of \$1,629,141,326 to manage the care of individuals in the expansion population. These payments covered medical, specialized behavioral health, pharmacy, and transportation services. Table 3 presents the total monthly payments made to each MCO for their expansion cohorts.

**Table 3: Total Payments to MCOs for the Expansion Population, SFY 2025 Quarter 4**

	ABH	ACLA	HBL	HHH	LHCC	UHC	TOTAL
<b>April-2025<sup>2</sup></b>	\$65,785,591	\$53,531,937	\$109,320,355	\$38,210,033	\$129,620,811	\$128,151,857	\$524,620,584
<b>May-2025<sup>3</sup></b>	\$43,946,431	\$34,370,897	\$70,383,597	\$24,295,376	\$81,699,122	\$82,681,944	\$337,377,368
<b>June-2025<sup>4</sup></b>	\$45,550,049	\$78,595,239	\$189,504,516	\$51,149,600	\$240,140,303	\$162,203,667	\$767,143,373
<b>SFY 2025 Q4</b>	\$155,282,071	\$166,498,074	\$369,208,468	\$113,655,009	\$451,460,236	\$373,037,468	\$1,629,141,326
<b>SFY 2025 YTD</b>	\$727,035,979	\$633,306,336	\$1,315,446,219	\$409,597,463	\$1,588,142,510	\$1,513,319,895	\$6,186,848,401

Source: ISIS/CP-012 and MARS Data Warehouse, data extracted on 07/17/2025.

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 aged 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 presents 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 2025 Quarter 4**

	DentaQuest	MCNA	TOTAL
<b>April-2025</b>	\$731,934	\$659,214	\$1,391,147
<b>May-2025</b>	\$725,096	\$650,071	\$1,375,167
<b>June-2025</b>	\$696,714	\$620,863	\$1,317,577
<b>SFY 2025 Q4</b>	\$2,153,744	\$1,930,148	\$4,083,892
<b>SFY 2025 YTD</b>	\$8,847,395	\$8,041,914	\$16,889,309

Source: ISIS/CP-012 and MARS Data Warehouse, data extracted on 07/17/2025.

## 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 aged 19 to 64 with a household income below 138% of the federal poverty level who do not meet other Medicaid eligibility criteria (Aged,

<sup>2</sup> April 25: March '25 Date of Service (DOS) PMPMs paid via lump sum using revised 07/01/2024 rates, pending possible mid-year rate adjustment. PMPMs for DOS Jul-Sep '24 and kick paid in Medicaid Management Information System (MMIS) and previous lump sums (including kicks and true-up) recouped.

<sup>3</sup> May 25: April '25 DOS PMPMs paid via lump sum using revised 07/01/2024 rates, pending possible mid-year rate adjustment. PMPMs for DOS Oct-Dec '24 paid in MMIS and previous. Includes \$28.2 million in Managed Care Incentive Program (MCIP) payments.

<sup>4</sup> June 25: May '25 DOS PMPMs paid via lump sum using revised 07/01/2024 rates, pending possible mid-year rate adjustment. Includes \$377.1 million in Directed Payments, \$38.7 million in MCIP payments, and \$32.5 million in lump sum kick payments.

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 4 were \$866,788,744 for the expansion population and \$847,683,806 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 made 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>5</sup> Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	43,777	41,467	37,558	95,542	0.0%
	Payments	\$0	\$0	\$0	\$0	\$13,651,200	\$12,540,409	\$10,716,827	\$36,908,437	0.0%
19 to 49	Enrollees	41,507	42,589	39,265	89,377	14,252	14,388	13,916	29,983	74.9%
	Payments	\$12,821,687	\$13,887,892	\$12,756,381	\$39,465,960	\$4,743,489	\$5,064,725	\$4,851,128	\$14,659,342	72.9%
50 to 64	Enrollees	10,805	11,043	10,371	23,055	5,173	5,272	5,025	10,295	69.1%
	Payments	\$3,496,792	\$3,696,504	\$3,655,012	\$10,848,307	\$2,002,530	\$2,077,795	\$2,062,705	\$6,143,031	63.8%
65+	Enrollees	0	0	0	0	276	258	222	543	0.0%
	Payments	\$0	\$0	\$0	\$0	\$113,576	\$94,676	\$108,156	\$316,408	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

<sup>5</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 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	4,665	4,715	3,986	12,492	0.0%
	Payments	\$0	\$0	\$0	\$0	\$34,037,359	\$33,360,951	\$29,214,055	\$96,612,364	0.0%
19 to 49	Enrollees	4,467	4,390	4,212	11,598	2,725	2,880	2,585	7,420	61.0%
	Payments	\$31,943,946	\$31,472,821	\$31,162,764	\$94,579,531	\$16,852,053	\$16,882,747	\$15,593,420	\$49,328,220	65.7%
50 to 64	Enrollees	1,580	1,613	1,463	4,004	979	960	966	2,412	62.4%
	Payments	\$15,290,382	\$16,056,970	\$15,623,495	\$46,970,847	\$10,901,613	\$10,157,962	\$12,151,097	\$33,210,672	58.6%
65+	Enrollees	0	0	0	0	82	75	71	190	0.0%
	Payments	\$0	\$0	\$0	\$0	\$840,820	\$1,168,901	\$796,736	\$2,806,457	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

**Table 5c: Hospital Outpatient Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	77,209	70,541	62,924	156,331	0.0%
	Payments	\$0	\$0	\$0	\$0	\$25,479,291	\$22,361,450	\$19,958,587	\$67,799,328	0.0%
19 to 49	Enrollees	67,883	68,334	62,445	136,016	25,223	25,435	23,825	47,797	74.0%
	Payments	\$34,610,409	\$34,764,261	\$34,021,342	\$103,396,012	\$15,446,579	\$14,605,109	\$13,540,845	\$43,592,532	70.3%
50 to 64	Enrollees	28,556	28,865	26,703	51,716	11,490	11,202	10,518	19,332	72.8%
	Payments	\$22,549,038	\$23,437,369	\$21,875,080	\$67,861,488	\$14,092,870	\$12,343,419	\$12,239,741	\$38,676,030	63.7%
65+	Enrollees	0	0	0	0	685	704	659	1,265	0.0%
	Payments	\$0	\$0	\$0	\$0	\$819,604	\$771,266	\$643,755	\$2,234,625	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

**Table 5d: NEMT Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	1,865	1,725	1,123	3,594	0.0%
	Payments	\$0	\$0	\$0	\$0	\$380,228	\$316,524	\$180,522	\$877,274	0.0%
19 to 49	Enrollees	4,717	4,442	2,784	7,746	3,314	3,074	2,008	5,102	60.3%
	Payments	\$1,601,765	\$1,551,941	\$851,187	\$4,004,893	\$1,022,687	\$997,976	\$571,292	\$2,591,955	60.7%
50 to 64	Enrollees	2,830	2,622	1,621	4,290	4,165	3,973	2,641	6,004	41.7%
	Payments	\$781,727	\$724,207	\$409,184	\$1,915,119	\$1,235,479	\$1,244,056	\$694,427	\$3,173,962	37.6%
65+	Enrollees	0	0	0	0	1,959	1,917	1,321	2,903	0.0%
	Payments	\$0	\$0	\$0	\$0	\$541,914	\$551,504	\$337,725	\$1,431,143	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

**Table 5e: Pharmacy Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	186,944	153,455	133,160	283,256	0.0%
	Payments	\$0	\$0	\$0	\$0	\$44,785,640	\$36,258,005	\$34,375,629	\$115,419,274	0.0%
19 to 49	Enrollees	166,476	151,256	147,880	220,565	52,970	48,533	48,023	70,645	75.7%
	Payments	\$96,547,212	\$81,791,753	\$78,733,145	\$257,072,110	\$38,213,048	\$31,503,047	\$31,178,964	\$100,895,060	71.8%
50 to 64	Enrollees	69,461	65,191	63,985	80,067	25,650	24,603	24,563	28,694	73.6%
	Payments	\$53,715,926	\$44,412,183	\$43,115,817	\$141,243,926	\$29,311,085	\$24,807,967	\$24,638,862	\$78,757,913	64.2%
65+	Enrollees	0	0	0	0	1,777	1,694	1,648	2,114	0.0%
	Payments	\$0	\$0	\$0	\$0	\$1,186,227	\$1,067,030	\$963,126	\$3,216,384	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

**Table 5f: Physician<sup>6</sup> Service Utilization and Expenditures for Expansion and Non-expansion Enrolled Individuals, SFY 2025 Quarter 4**

Age Cohort		Expansion				Non-Expansion				Expansion as a % of TOTAL
		April 2025	May 2025	June 2025	Q4 TOTAL	April 2025	May 2025	June 2025	Q4 TOTAL	
0 to 18	Enrollees	0	0	0	0	168,719	160,214	142,236	309,258	0.0%
	Payments	\$0	\$0	\$0	\$0	\$34,712,115	\$36,935,227	\$31,613,793	\$103,261,136	0.0%
19 to 49	Enrollees	101,336	101,675	106,750	187,429	36,894	36,950	39,731	64,879	74.3%
	Payments	\$19,271,938	\$22,828,927	\$22,676,382	\$64,777,247	\$8,439,097	\$10,194,082	\$10,142,006	\$28,775,185	69.2%
50 to 64	Enrollees	38,998	39,871	40,051	65,608	14,886	15,314	15,577	23,699	73.5%
	Payments	\$9,950,369	\$12,404,644	\$12,298,290	\$34,653,303	\$4,681,872	\$5,815,540	\$5,561,872	\$16,059,284	68.3%
65+	Enrollees	0	0	0	0	987	1,006	1,014	1,731	0.0%
	Payments	\$0	\$0	\$0	\$0	\$290,409	\$339,031	\$308,350	\$937,790	0.0%

Source: MARS Data Warehouse, data extracted on 08/15/2025.

<sup>6</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. 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 permitted to enter into supplemental rebate agreements for drugs included in the single PDL, or to engage in spread pricing. For dates of service on and after May 1, 2019, MCOs and PBMs may collect rebates only on items not included in the single PDL, such as diabetes testing supplies.

Table 6 presents monthly revenues paid to each 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 calculating capitation rates.

**Table 6: MCO PBM Revenues by Month, SFY 2025 Quarter 4<sup>7</sup>**

	ABH	ACLA	HBL	HHH	LHCC	UHC
<b>April 2025</b>						
Transaction Fees Paid by MCO to PBM	\$186,361	\$156,140	\$307,202	\$81,655	\$411,947	\$413,352
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$108,554	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>May 2025</b>						
Transaction Fees Paid by MCO to PBM	\$0	\$126,664	\$480,627	\$129,175	\$330,354	\$625,752
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$6,380	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>June 2025</b>						
Transaction Fees Paid by MCO to PBM	\$291,869	\$0	-\$1	\$0	\$305,316	\$0
Rebates and Discounts Retained by the MCO or PBM	\$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>Quarter 4 Totals (April - June 2025)</b>						
Transaction Fees Paid by MCO to PBM	\$478,230	\$282,804	\$787,828	\$210,830	\$1,047,617	\$1,039,104
Rebates and Discounts Retained by the MCO or PBM	\$0	\$0	\$114,934	\$0	\$0	\$0
Any Other Monies Retained by the PBM and not Reimbursed to Pharmacists	\$0	\$0	\$0	\$0	\$0	\$0
<b>SFY YTD (July 2024 - June 2025)</b>						
Transaction Fees Paid by MCO to PBM	\$1,766,766	\$1,529,680	\$2,913,908	\$778,235	\$4,649,189	\$3,840,735
Rebates and Discounts Retained by the MCO or PBM <sup>8</sup>	(\$1,318)	\$0	\$363,459	\$0	\$59,901	\$387,124
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>7</sup> May contain small amounts from prior contracted PBM due to adjustments.

<sup>8</sup> The negative amount reflects amount reported by prior contracted PBM in previous quarter.

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