



# OHIO DEPARTMENT OF HEALTH

246 North High Street  
Columbus, Ohio 43215

614/466-3543  
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

December 3, 2015

Ms. Faith A. Davis  
Government Contract Specialist  
Abbott Nutrition  
3300 Stelzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for November 2015. This invoice includes the number of cans of formula redeemed in the month of November for food instruments with a first day of use as of August 1, 2015 – November 30, 2015. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during November through the food instrument redemption system and WIC EBT is \$4,745,163.36. Using the established methodology, the amount to be deducted because of partial redemptions is \$189.86, leaving a total balance of **\$4,744,973.50**.

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,

A handwritten signature in black ink, appearing to read "Michele Frizzell".

Michele A. Frizzell, RD, MBA, Chief  
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

<b>Ohio Department of Health</b>			Program Tracking No.	
<b>Request for Invoice</b>			<b>88L00216</b>	
Revenue Reference Number:	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:	
<b>ABB6</b>				
Customer Name and Address:			Instructions:	
<b>Abbott Nutrition</b> <b>c/o Faith A. Davis</b> <b>Government Contract Specialist</b> <b>3300 Stelzer Road</b> <b>Columbus, OH 43219</b>			<b>Complete form and sign before sending to: Accounts Receivable, 4<sup>th</sup> Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.</b>	

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$4,744,973.50
Customer Contact Person:					
Description of Service: For cans of infant formula redeemed in November 2015 for August 2015 through November 2015, and minus the partial redemption amount.					

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Name/Title of Person Making Request:	Signature:	Date:
<b>Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services</b>	<i>Michele A. Frizzell</i>	<b>12/3/2015</b>

FROM:  
Ohio Department of Health  
Bureau of Nutrition Services  
246 North High Street, 6th Floor  
Columbus, Ohio 43215

TO:  
Abbott Nutrition  
3300 Steilzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

MONTH

	July CANS	August CANS	September CANS	October CANS	November CANS	TOTAL CANS	REBATE	TOTAL DOLLARS
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	0	291	2,326	42,298	44,915	4.1190	\$185,004.89
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	57	1,091	1,148	2.8500	\$3,271.80
1 qt RTF SIMILAC SENSITIVE	0	0	0	81	2,142	2,223	2.7850	\$6,191.06
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	0	69	648	9,798	212,643	223,158	13.0650	\$2,915,559.27
12.4 oz PWD SIMILAC SOY ISOMIL	0	0	94	1,399	41,580	43,073	13.5320	\$582,863.84
13 oz CONC SIMILAC SOY ISOMIL	0	0	8	519	12,468	12,995	4.4080	\$57,281.96
12.6 oz PWD SIMILAC SENSITIVE	0	3	140	1,808	66,005	67,956	12.9620	\$880,845.67
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	6	297	303	3.2950	\$998.39
12.3 oz POWDER SIMILAC for SPIT-UP	0	3	5	195	8,113	8,316	13.5320	\$112,532.11
32 oz RTF SIMILAC for SPIT-UP	0	0	0	12	173	185	3.3210	\$614.39
<b>TOTAL AMOUNT DUE</b>								<b>\$4,745,163.36</b>

November  
NON-BREASTFED 61,633  
PARTIALLY BREASTFED 2,298  
BREASTFED 6,829  
**TOTAL 70,760**

MONTHLY REBATE TRACKING FORM

	July	August	September	October	November	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$0.00	\$1,198.63	\$9,580.79	\$174,225.46	\$186,004.89
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$0.00	\$0.00	\$162.45	\$3,109.35	\$3,271.80
1qt RTF SIMILAC SENSITIVE	\$0.00	\$0.00	\$0.00	\$225.59	\$5,965.47	\$6,191.06
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$901.49	\$8,466.12	\$128,010.97	\$2,778,180.80	\$2,915,559.27
12.4 oz PWD SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$1,272.01	\$16,931.27	\$562,660.56	\$582,863.84
13 oz CONC SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$35.26	\$2,287.75	\$54,958.94	\$57,281.96
12.6 oz PWD SIMILAC SENSITIVE	\$0.00	\$38.89	\$1,814.68	\$23,435.30	\$855,556.81	\$880,845.67
1 qt RTF SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$0.00	\$19.77	\$978.62	\$998.39
12.3 oz POWDER SIMILAC for SPIT-UP	\$0.00	\$40.60	\$67.66	\$2,638.74	\$109,785.12	\$112,532.11
32 oz RTF SIMILAC FOR SPIT-UP	\$0.00	\$0.00	\$0.00	\$39.85	\$574.53	\$614.39
<b>TOTAL</b>	\$0.00	\$980.97	\$12,854.36	\$185,332.38	\$4,545,995.66	\$4,745,163.36



**Ohio Department of Health - Bureau of Nutrition Services**  
**ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)**



FROM:

Ohio Department of Health  
 246 North High Street, 6th Floor  
 Columbus, Ohio 43215

TO:

Ross Laboratories  
 625 Cleveland Avenue  
 Columbus, Ohio 43215

**Coupon Formula Rebates**

NOV 2015	Food Item Description	Begin Month Year Name	Can Count	Rebate Amount	Rebate Total
279 - 13oz Conc Sim Adv		SEP 2015	279	\$4,1190	\$1,149.20
333 - 12.4oz Pwdr Sim Adv		OCT 2015	975	\$4,1190	\$4,016.03
		AUG 2015	66	\$13,0650	\$862.29
		SEP 2015	628	\$13,0650	\$8,204.82
		OCT 2015	3,385	\$13,0650	\$44,225.02
334 - 12.4oz Pwdr Sim Soy Isomil		NOV 2015	134	\$13,0650	\$1,750.71
		SEP 2015	93	\$13,5320	\$1,258.48
		OCT 2015	526	\$13,5320	\$7,117.83
		NOV 2015	7	\$13,5320	\$94.72
335 - 13oz Conc Sim Soy Isomil		SEP 2015	8	\$4,4080	\$35.26
		OCT 2015	180	\$4,4080	\$793.44
337 - 12.6/12oz Pwdr Similac Sensitive		AUG 2015	3	\$12,9620	\$38.89
		SEP 2015	41	\$12,9620	\$531.44
337 - 12oz Pwdr Similac Sensitive		SEP 2015	92	\$12,9620	\$1,192.50
		OCT 2015	561	\$12,9620	\$7,271.68
		NOV 2015	28	\$12,9620	\$362.94
360 - 12.3/12oz Powder Similac for Spit-Up		SEP 2015	3	\$13,5320	\$40.60
360 - 12oz Powder Similac for Spit-Up		AUG 2015	3	\$13,5320	\$40.60
		SEP 2015	2	\$13,5320	\$27.06
		OCT 2015	49	\$13,5320	\$663.07

**Summary**

**\$79,676.58**

Dec 2, 2015



Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health  
246 North High Street, 6th Floor  
Columbus, Ohio 43215

TO:

Ross Laboratories  
625 Cleveland Avenue  
Columbus, Ohio 43215

EBT Formula Rebates

NOV 2015

Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMILPWD 12.4OZ	SEP 2015	1	13.532	\$13.53
	OCT 2015	873	13.532	\$11,813.44
	NOV 2015	41,573	13.532	\$562,565.84
21/032 - SIMSOYISOMIL 13OZ CONC	OCT 2015	339	4.408	\$1,494.31
	NOV 2015	12,468	4.408	\$54,958.94
21/034 - SIMSENSITIVE 12.0OZ PWD	SEP 2015	7	12.962	\$90.73
	OCT 2015	1,247	12.962	\$16,163.61
	NOV 2015	65,977	12.962	\$855,193.87
21/036 - SIMSENSITIVE 1 QT RTF	OCT 2015	81	2.785	\$225.59
	NOV 2015	2,142	2.785	\$5,965.47
21/071 - SIM SPIT-UP 1 QT RTF	OCT 2015	12	3.321	\$39.85
	NOV 2015	173	3.321	\$574.53
21/082 - SIM ADVANCE 12.4OZ PWD	AUG 2015	3	13.065	\$39.20
	SEP 2015	20	13.065	\$261.30
	OCT 2015	6,413	13.065	\$83,785.85
	NOV 2015	212,509	13.065	\$2,776,430.09
21/083 - SIMADVANCE 13OZ CONC	SEP 2015	12	4.119	\$49.43
	OCT 2015	1,351	4.119	\$5,564.77
	NOV 2015	42,298	4.119	\$174,225.46
21/085 - SIM SPIT-UP PWD 12.0OZ	OCT 2015	146	13.532	\$1,975.67
	NOV 2015	8,113	13.532	\$109,785.12
21/501 - SIM SOY ISOMIL 1 QT RTF	OCT 2015	6	3.295	\$19.77
	NOV 2015	297	3.295	\$978.62
21/502 - SIM ADVANCE 1 QT RTF	OCT 2015	57	2.85	\$162.45
	NOV 2015	1,091	2.85	\$3,109.35
<b>Summary</b>				<b>\$4,665,666.78</b>

Dec 2, 2015



Ohio Department of Health - Bureau of Nutrition Services



ODHWIC0402 - WIC Formula Rebate Partial List Report (Prompted)

NOV 2015

Food Item Description	Begin Month Year Name	Partial Count	Rebate Amount	Partial Total
279 - 13oz Conc Sim Adv	SEP 2015	0	\$4,1190	\$0.00
	OCT 2015	11	\$4,1190	\$45.31
333 - 12.4oz Pwdr Sim Adv	AUG 2015	2	\$13,0650	\$26.13
	SEP 2015	0	\$13,0650	\$0.00
	OCT 2015	6	\$13,0650	\$78.39
	NOV 2015	0	\$13,0650	\$0.00
334 - 12.4oz Pwdr Sim Soy Isomil	SEP 2015	1	\$13,5320	\$13.53
	OCT 2015	1	\$13,5320	\$13.53
	NOV 2015	0	\$13,5320	\$0.00
335 - 13oz Conc Sim Soy Isomil	SEP 2015	0	\$4,4080	\$0.00
	OCT 2015	0	\$4,4080	\$0.00
337 - 12.6/12oz Pwdr Similac Sensitive	AUG 2015	0	\$12,9620	\$0.00
	SEP 2015	0	\$12,9620	\$0.00
337 - 12oz Pwdr Similac Sensitive	SEP 2015	0	\$12,9620	\$0.00
	OCT 2015	1	\$12,9620	\$12.96
	NOV 2015	0	\$12,9620	\$0.00
360 - 12.3/12oz Powder Similac for Spit-Up	SEP 2015	0	\$13,5320	\$0.00
360 - 12oz Powder Similac for Spit-Up	AUG 2015	0	\$13,5320	\$0.00
	SEP 2015	0	\$13,5320	\$0.00
	OCT 2015	0	\$13,5320	\$0.00
<b>Summary</b>			<b>\$19,836</b>	<b>\$0.00</b>

Dec 2, 2015



Report

Coupon Rebated Formula Counts

279 - 13oz Conc Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	15,637	8,033	113		23,783
SEP 2015		4,631	279		12,582
OCT 2015		2,466	975		3,441
Total(Begin Month Year Name)	15,637	15,705	7,210	1,254	39,806

309 - 1 QT RTF Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	Total(Process Month Year Name)
AUG 2015	207	90	21	297
SEP 2015		106	48	127
OCT 2015		196	69	472
Total(Begin Month Year Name)	207	196	69	472

312 - 1 QT RTF Similac Sensitive

Can Count	AUG 2015	SEP 2015	OCT 2015	Total(Process Month Year Name)
AUG 2015	869	133	100	1,002
SEP 2015		438	86	538
OCT 2015		571	186	86
Total(Begin Month Year Name)	869	571	186	1,626

333 - 12.4oz Pwdr Sim Adv

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	53,102	29,813	939	66	83,920
SEP 2015		23,033	14,985	628	38,646
OCT 2015		5,592	3,385	134	8,977
NOV 2015		21,516	4,213		134
Total(Begin Month Year Name)	53,102	52,846	21,516	4,213	131,677

334 - 12.4oz Pwdr Sim Soy Isomil

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	10,719	4,825	112		15,656
SEP 2015		4,366	2,714	93	7,173
OCT 2015		936	526	7	1,462
NOV 2015		9,191	3,762		7
Total(Begin Month Year Name)	10,719	9,191	3,762	626	24,298

**335 - 13oz Conc Sim Soy Isomil**

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	3,984	1,797	50		5,831
SEP 2015		1,873	963	8	2,844
OCT 2015			557	180	737
<b>Total(Begin Month Year Name)</b>	<b>3,984</b>	<b>3,670</b>	<b>1,570</b>	<b>188</b>	<b>9,412</b>

**337 - 12.6/12oz Pwdr Similac Sensitive**

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	9,931	4,090	77	3	14,101
SEP 2015		2,789	1,453	41	4,283
OCT 2015			7	7	7
<b>Total(Begin Month Year Name)</b>	<b>9,931</b>	<b>6,879</b>	<b>1,537</b>	<b>44</b>	<b>18,391</b>

**337 - 12oz Pwdr Similac Sensitive**

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	6,497	2,222	21		8,740
SEP 2015		4,537	1,476	92	6,105
OCT 2015			1,511	561	2,072
NOV 2015				28	28
<b>Total(Begin Month Year Name)</b>	<b>6,497</b>	<b>6,759</b>	<b>3,008</b>	<b>681</b>	<b>16,945</b>

**339 - 1 QT RTF Sim Soy Isomil**

Can Count	AUG 2015	SEP 2015	Total(Process Month Year Name)
AUG 2015	132	7	139
SEP 2015		46	46
<b>Total(Begin Month Year Name)</b>	<b>132</b>	<b>53</b>	<b>185</b>

**360 - 12.3/12oz Powder Similac for Spit-Up**

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	1,097	448	12		1,557
SEP 2015		412	111	3	526
<b>Total(Begin Month Year Name)</b>	<b>1,097</b>	<b>860</b>	<b>123</b>	<b>3</b>	<b>2,083</b>

**360 - 12oz Powder Similac for Spit-Up**

Can Count	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month Year Name)
AUG 2015	749	236			988
SEP 2015		493	116	2	611
OCT 2015			230	49	279
<b>Total(Begin Month Year Name)</b>	<b>749</b>	<b>729</b>	<b>346</b>	<b>54</b>	<b>1,878</b>

361 - 32oz RTF Similac for Spit-Up

Can Count	AUG 2015		SEP 2015		OCT 2015		Total(Process Month Year Name)
AUG 2015			37	10			47
SEP 2015				29	9		38
Total(Begin, Month Year Name)			37	39	9		85

Dec 2, 2015

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Ohio Department of Health - Bureau of Nutrition Services  
 ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report  
 EBT Rebated Formula Counts

**21/031 - SIMSOYISOMILPVD 12.4OZ**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	26,475	982	2		27,459
SEP 2015		34,456	834	1	35,291
OCT 2015			40,546	873	41,419
NOV 2015				41,573	41,573
<b>Total(Benefit Month)</b>	<b>26,475</b>	<b>35,438</b>	<b>41,382</b>	<b>42,447</b>	<b>145,742</b>

**21/032 - SIMSOYISOMIL 13OZ CONG**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	7,788	532			8,320
SEP 2015		10,360	364		10,724
OCT 2015			12,398	339	12,737
NOV 2015				12,468	12,468
<b>Total(Benefit Month)</b>	<b>7,788</b>	<b>10,892</b>	<b>12,762</b>	<b>12,807</b>	<b>44,249</b>

**21/034 - SIMSENSITIVE 12.0OZ PWD**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	40,330	1,195	5		41,530
SEP 2015		53,330	1,191	7	54,528
OCT 2015			63,169	1,247	64,416
NOV 2015				65,977	65,977
<b>Total(Benefit Month)</b>	<b>40,330</b>	<b>54,525</b>	<b>64,365</b>	<b>67,231</b>	<b>226,451</b>

**21/036 - SIMSENSITIVE 1 QT RTF**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	1,031	61			1,092
SEP 2015		1,563	71		1,634
OCT 2015			1,908	81	1,989
NOV 2015				2,142	2,142
<b>Total(Benefit Month)</b>	<b>1,031</b>	<b>1,624</b>	<b>1,979</b>	<b>2,223</b>	<b>6,857</b>

**21/071 - SIM SPIT-UP 1 QT RTF**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	147	16			163
SEP 2015		180	4		184
OCT 2015			203	12	215
NOV 2015				173	173
<b>Total(Benefit Month)</b>	<b>147</b>	<b>196</b>	<b>207</b>	<b>185</b>	<b>735</b>

**21/082 - SIM ADVANCE 12.4OZ PWD**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	135,820	5,798	14	3	141,635
SEP 2015		176,291	5,665	20	181,976
OCT 2015			206,216	6,413	212,629
NOV 2015				212,509	212,509
<b>Total(Benefit Month)</b>	<b>135,820</b>	<b>182,089</b>	<b>211,895</b>	<b>218,945</b>	<b>748,749</b>

**21/083 - SIMADVANCE 13OZ CONC**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	23,993	1,372	30		25,395
SEP 2015		32,086	1,170	12	33,268
OCT 2015			40,086	1,351	41,437
NOV 2015				42,298	42,298
<b>Total(Benefit Month)</b>	<b>23,993</b>	<b>33,458</b>	<b>41,286</b>	<b>43,661</b>	<b>142,398</b>

**21/085 - SIM SPIT-UP PWD 12.0OZ**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	4,668	149			4,817
SEP 2015		6,422	179		6,601
OCT 2015			7,537	146	7,683
NOV 2015				8,113	8,113
<b>Total(Benefit Month)</b>	<b>4,668</b>	<b>6,571</b>	<b>7,716</b>	<b>8,259</b>	<b>27,214</b>

**21/501 - SIM SOY ISOMIL 1 QT RTF**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	286	1			287
SEP 2015		339	15		354
OCT 2015			342	6	348
NOV 2015				297	297
<b>Total(Benefit Month)</b>	<b>286</b>	<b>340</b>	<b>357</b>	<b>303</b>	<b>1,286</b>

**21/502 - SIM ADVANCE 1 QT RTF**

Quantity	AUG 2015	SEP 2015	OCT 2015	NOV 2015	Total(Process Month)
AUG 2015	770	40			810
SEP 2015		945	74		1,019
OCT 2015			1,036	57	1,093
NOV 2015				1,091	1,091
<b>Total(Benefit Month)</b>	<b>770</b>	<b>985</b>	<b>1,110</b>	<b>1,148</b>	<b>4,013</b>

Dec 2, 2015



# OHIO DEPARTMENT OF HEALTH

246 North High Street  
Columbus, Ohio 43215

614/466-3543  
[www.odh.ohio.gov](http://www.odh.ohio.gov)

John R. Kasich/Governor

Richard Hodges/Director of Health

January 4, 2016

Ms. Faith A. Davis  
Government Contract Specialist  
Abbott Nutrition  
3300 Stelzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for December 2015. This invoice includes the number of cans of formula redeemed in the month of December for food instruments with a first day of use as of August 1, 2015 – December 31, 2015. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during December through the food instrument redemption system and WIC EBT is **\$4,696,946.95**. There were no partial redemptions in the month of December.

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,

  
Michele A. Frizzell, RD, MBA, Chief  
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

<b>Ohio Department of Health</b>			Program Tracking No.	
<b>Request for Invoice</b>			<b>88L00316</b>	
Revenue Reference Number:	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:	
<b>ABB6</b>				
Customer Name and Address:			Instructions:	
<b>Abbott Nutrition</b> <b>c/o Faith A. Davis</b> <b>Government Contract Specialist</b> <b>3300 Steizer Road</b> <b>Columbus, OH 43219</b>			<b>Complete form and sign before sending to: Accounts Receivable, 4<sup>th</sup> Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.</b>	

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$4,696,946.95
Customer Contact Person:					
Description of Service: For cans of infant formula redeemed in December 2015 for August 2015 through December 2015.					

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$
Customer Contact Person:					
Description of Service:					

Name/Title of Person Making Request:	Signature:	Date:
<b>Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services</b>	<i>Michele A. Frizzell</i>	<b>1/4/2016</b>

FROM:  
Ohio Department of Health  
Bureau of Nutrition Services  
246 North High Street, 6th Floor  
Columbus, Ohio 43215

TO:  
Abbott Nutrition  
3300 Stelzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

MONTH

	August CANS	September CANS	October CANS	November CANS	December CANS	TOTAL CANS	REBATE	TOTAL DOLLARS
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	0	33	1,205	42,081	43,319	4,1190	\$178,430.96
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	43	961	1,004	2,8500	\$2,861.40
1 qt RTF SIMILAC SENSITIVE	0	0	0	78	2,392	2,470	2,7850	\$6,678.95
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	64	0	164	6,062	214,284	220,574	13,0650	\$2,881,799.31
12.4 oz PWD SIMILAC SOY ISOMIL	0	0	20	848	41,887	42,755	13,5320	\$578,560.66
13 oz CONC SIMILAC SOY ISOMIL	0	0	12	343	12,309	12,664	4,4080	\$55,822.91
12.6 oz PWD SIMILAC SENSITIVE	0	0	29	1,094	66,731	67,854	12,9620	\$879,523.55
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	29	255	284	3,2950	\$935.78
12.3 oz POWDER SIMILAC for SPIT-UP	0	0	0	115	8,120	8,235	13,5320	\$111,436.02
32 oz RTF SIMILAC for SPIT-UP	0	0	0	5	205	210	3,3210	\$697.41
<b>TOTAL AMOUNT DUE</b>								<b>\$4,696,946.95</b>

December  
NON-BREASTFED 61,442  
PARTIALLY BREASTFED 2,300  
BREASTFED 6,739  
**TOTAL 70,481**

MONTHLY REBATE TRACKING FORM

	August	September	October	November	December	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$0.00	\$135.93	\$4,963.40	\$173,331.64	\$178,430.96
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$0.00	\$0.00	\$122.55	\$2,738.85	\$2,861.40
1qt RTF SIMILAC SENSITIVE	\$0.00	\$0.00	\$0.00	\$217.23	\$6,661.72	\$6,878.95
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	\$836.16	\$0.00	\$2,142.66	\$79,200.03	\$2,799,620.46	\$2,881,799.31
12.4 oz PWD SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$270.64	\$11,475.14	\$566,814.88	\$578,560.66
13 oz CONC SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$52.90	\$1,511.94	\$54,258.07	\$55,822.91
12.6 oz PWD SIMILAC SENSITIVE	\$0.00	\$0.00	\$375.90	\$14,180.43	\$664,967.22	\$879,523.55
1 qt RTF SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$0.00	\$95.56	\$840.23	\$935.78
12.3 oz POWDER SIMILAC for SPIT-UP	\$0.00	\$0.00	\$0.00	\$1,556.18	\$109,879.84	\$111,436.02
32 oz RTF SIMILAC FOR SPIT-UP	\$0.00	\$0.00	\$0.00	\$16.61	\$680.81	\$697.41
<b>TOTAL</b>	<b>\$836.16</b>	<b>\$0.00</b>	<b>\$2,978.02</b>	<b>\$113,339.05</b>	<b>\$4,579,793.72</b>	<b>\$4,696,946.95</b>



Ohio Department of Health - Bureau of Nutrition Services



ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health  
246 North High Street, 6th Fl  
Columbus, Ohio 43215

TO:

Ross Laboratories  
625 Cleveland Avenue  
Columbus, Ohio 43215

Coupon Formula Rebates

DEC 2015

Food Item Description	Begin Month Year Name	Can Count	Rebate Amount	Rebate Total
279 - 13oz Conc Sim Adv	OCT 2015	33	\$4,1190	\$135.93
333 - 12.4oz Pwdr Sim Adv	AUG 2015	64	\$13.0650	\$836.16
	OCT 2015	153	\$13.0650	\$1,998.95
	NOV 2015	55	\$13.0650	\$718.58
334 - 12.4oz Pwdr Sim Soy Isomil	OCT 2015	20	\$13.5320	\$270.64
335 - 13oz Conc Sim Soy Isomil	OCT 2015	12	\$4.4080	\$52.90
337 - 12oz Pwdr Similac Sensitive	OCT 2015	29	\$12.9620	\$375.90
<b>Summary</b>				<b>\$43,890.02</b>

Jan 4, 2016



**Ohio Department of Health - Bureau of Nutrition Services**



**ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)**

FROM:

Ohio Department of Health  
246 North High Street, 6th Floor  
Columbus, Ohio 43215

TO:

Ross Laboratories  
625 Cleveland Avenue  
Columbus, Ohio 43215

**EBT Formula Rebates**

DEC 2015	Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMIL PWD 12.4OZ		NOV 2015	848	13.532	\$11,475.14
21/032 - SIMSOYISOMIL 13OZ CONC		DEC 2015	41,887	13.532	\$566,814.88
		NOV 2015	343	4.408	\$1,511.94
		DEC 2015	12,309	4.408	\$54,258.07
21/034 - SIMSENSITIVE 12.0OZ PWD		NOV 2015	1,094	12.962	\$14,180.43
		DEC 2015	66,731	12.962	\$864,967.22
21/036 - SIMSENSITIVE 1 QT RTF		NOV 2015	78	2.785	\$217.23
		DEC 2015	2,392	2.785	\$6,661.72
21/071 - SIM SPIT-UP 1 QT RTF		NOV 2015	5	3.321	\$16.61
		DEC 2015	205	3.321	\$680.81
21/082 - SIM ADVANCE 12.4OZ PWD		OCT 2015	11	13.065	\$143.72
		NOV 2015	6,007	13.065	\$78,481.46
		DEC 2015	214,284	13.065	\$2,799,620.46
21/083 - SIMADVANCE 13OZ CONC		NOV 2015	1,205	4.119	\$4,963.40
		DEC 2015	42,081	4.119	\$173,331.64
21/085 - SIM SPIT-UP PWD 12.0OZ		NOV 2015	115	13.532	\$1,556.18
		DEC 2015	8,120	13.532	\$109,879.84
21/501 - SIM SOY ISOMIL 1 QT RTF		NOV 2015	29	3.295	\$95.56
		DEC 2015	255	3.295	\$840.23
21/502 - SIM ADVANCE 1 QT RTF		NOV 2015	43	2.85	\$122.55
		DEC 2015	961	2.85	\$2,738.85

Summary

\$4,692,557.91

Jan 4, 2016

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Ohio Department of Health - Bureau of Nutrition Services



ODHWIC0402 - WIC Formula Rebate Partial List Report (Prompted)

DEC 2015

Food Item Description	Begin Month Year Name	Partial Count	Rebate Amount	Partial Total
279 - 13oz Conc Sim Adv	OCT 2015	0	\$4,1190	\$0.00
333 - 12.4oz Pwdr Sim Adv	AUG 2015	0	\$13,0650	\$0.00
	OCT 2015	0	\$13,0650	\$0.00
	NOV 2015	0	\$13,0650	\$0.00
334 - 12.4oz Pwdr Sim Soy Isomil	OCT 2015	0	\$13,5320	\$0.00
335 - 13oz Conc Sim Soy Isomil	OCT 2015	0	\$4,4080	\$0.00
337 - 12oz Pwdr Similac Sensitive	OCT 2015	0	\$12,9620	\$0.00

Summary

Jan 4, 2016



**Ohio Department of Health - Bureau of Nutrition Services**



**ODHWIC0403 - WICP50A5 Rebated Formula Item**

**Coupon Rebated Formula Counts**

279 - 13oz Conc Sim Adv		SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
Can Count						
SEP 2015		7,672		4,631	279	12,582
OCT 2015				2,466	975	3,474
Total(Begin Month Year Name)		7,672		7,097	1,254	33
309 - 1 QT RTF Sim Adv						33
Can Count						
SEP 2015		106		21	127	
OCT 2015				48	48	
Total(Begin Month Year Name)		106		69	175	
312 - 1 QT RTF Similac Sensitive						
Can Count						
SEP 2015		438		100	538	
OCT 2015				86	86	
Total(Begin Month Year Name)		438		186	624	
333 - 12.4oz Pwdr Sim Adv						
Can Count						
SEP 2015		23,033		14,985	628	38,646
OCT 2015				5,592	3,385	9,130
NOV 2015				134	55	189
Total(Begin Month Year Name)		23,033		20,577	4,147	208
334 - 12.4oz Pwdr Sim Soy Isomil						
Can Count						
SEP 2015		4,366		2,714	93	7,173
OCT 2015				936	526	1,482
NOV 2015				7	7	7
Total(Begin Month Year Name)		4,366		3,650	626	20
						20
						8,662

**335 - 13oz Conc Sim Soy Isomil**

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015		1,873	963	8	2,844
OCT 2015			557	180	749
<b>Total(Begin Month Year Name)</b>		<b>1,873</b>	<b>1,520</b>	<b>188</b>	<b>3,593</b>

**337 - 12.6/12oz Pwdr Similac Sensitive**

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015		2,789	1,453	41	4,283
OCT 2015			7		7
<b>Total(Begin Month Year Name)</b>		<b>2,789</b>	<b>1,460</b>	<b>41</b>	<b>4,290</b>

**337 - 12oz Pwdr Similac Sensitive**

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015		4,537	1,476	92	6,105
OCT 2015			1,511	561	2,101
NOV 2015				28	28
<b>Total(Begin Month Year Name)</b>		<b>4,537</b>	<b>2,987</b>	<b>681</b>	<b>8,234</b>

**339 - 1 QT RTF Sim Soy Isomil**

Can Count	SEP 2015	Total(Process Month Year Name)
SEP 2015		46
<b>Total(Begin Month Year Name)</b>		<b>46</b>

**360 - 12.3/12oz Powder Similac for Spit-Up**

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015		412	111	3	526
<b>Total(Begin Month Year Name)</b>		<b>412</b>	<b>111</b>	<b>3</b>	<b>526</b>

**360 - 12oz Powder Similac for Spit-Up**

Can Count	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month Year Name)
SEP 2015		493	116	2	611
OCT 2015			230	49	279
<b>Total(Begin Month Year Name)</b>		<b>493</b>	<b>346</b>	<b>51</b>	<b>890</b>

361 - 32oz RTF Similac for Spit-Up

Can Count

SEP 2015

OCT 2015

Total(Process

Month Year

(Name)

SEP 2015

Total(Begin Month Year Name)

Jan 4, 2016

29

29

9

9

38

38

1

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Ohio Department of Health - Bureau of Nutrition Services

ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report

EBT Rebated Formula Counts

21/031 - SIMSOYISOMIL PWD 12.4OZ

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	34,456	834	1		35,291
OCT 2015		40,546	873		41,419
NOV 2015			41,573	848	42,421
DEC 2015				41,887	41,887
Total(Benefit Month)	34,456	41,380	42,447	42,735	161,018

21/032 - SIMSOYISOMIL 13OZ CONC

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	10,360	364			10,724
OCT 2015		12,398	339		12,737
NOV 2015			12,468	343	12,811
DEC 2015				12,309	12,309
Total(Benefit Month)	10,360	12,762	12,807	12,652	48,581

21/034 - SIMSENSITIVE 12.0OZ PWD

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	53,330	1,191	7		54,528
OCT 2015		63,169	1,247		64,416
NOV 2015			65,977	1,094	67,071
DEC 2015				66,731	66,731
Total(Benefit Month)	53,330	64,360	67,231	67,825	252,746

21/036 - SIMSENSITIVE 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	1,563	71			1,634
OCT 2015		1,908	81		1,989
NOV 2015			2,142	78	2,220
DEC 2015				2,392	2,392
Total(Benefit Month)	1,563	1,979	2,223	2,470	8,235

21/071 - SIM SPIT-UP 1 QT RTF

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	180	4			184
OCT 2015		203	12		215
NOV 2015			173	5	178
DEC 2015				205	205
Total(Benefit Month)	180	207	185	210	782

**21/082 - SIM ADVANCE 12.4OZ PWD**

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	176,291	5,665	20		181,976
OCT 2015		206,216	6,413	11	212,640
NOV 2015			212,509	6,007	218,516
DEC 2015				214,284	214,284
<b>Total(Benefit Month)</b>	<b>176,291</b>	<b>211,881</b>	<b>218,942</b>	<b>220,302</b>	<b>827,416</b>

**21/083 - SIMADVANCE 13OZ CONC**

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	32,086	1,170	12		33,268
OCT 2015		40,086	1,351		41,437
NOV 2015			42,298	1,205	43,503
DEC 2015				42,081	42,081
<b>Total(Benefit Month)</b>	<b>32,086</b>	<b>41,256</b>	<b>43,661</b>	<b>43,286</b>	<b>160,289</b>

**21/085 - SIM SPIT-UP PWD 12.0OZ**

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	6,422	179			6,601
OCT 2015		7,537	146		7,683
NOV 2015			8,113	115	8,228
DEC 2015				8,120	8,120
<b>Total(Benefit Month)</b>	<b>6,422</b>	<b>7,716</b>	<b>8,259</b>	<b>8,235</b>	<b>30,632</b>

**21/501 - SIM SOY ISOMIL 1 QT RTF**

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	339	15			364
OCT 2015		342	6		348
NOV 2015			297	29	326
DEC 2015				255	255
<b>Total(Benefit Month)</b>	<b>339</b>	<b>357</b>	<b>303</b>	<b>284</b>	<b>1,283</b>

**21/502 - SIM ADVANCE 1 QT RTF**

Quantity	SEP 2015	OCT 2015	NOV 2015	DEC 2015	Total(Process Month)
SEP 2015	945	74			1,019
OCT 2015		1,036	57		1,093
NOV 2015			1,091	43	1,134
DEC 2015				961	961
<b>Total(Benefit Month)</b>	<b>945</b>	<b>1,110</b>	<b>1,148</b>	<b>1,004</b>	<b>4,207</b>

Jan 4, 2016



# OHIO DEPARTMENT OF HEALTH

246 North High Street  
Columbus, Ohio 43215

614/466-3543  
www.odh.ohio.gov

John R. Kasich/Governor

Richard Hodges/Director of Health

February 4, 2016

Ms. Faith A. Davis  
Government Contract Specialist  
Abbott Nutrition  
3300 Stelzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

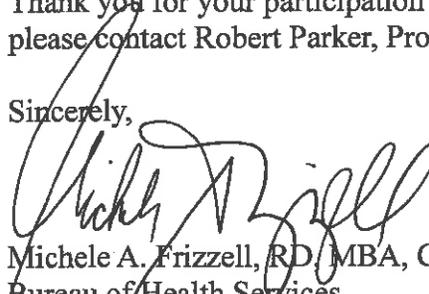
Dear Ms. Davis:

Enclosed is Ohio's WIC invoice and formula report for January 2016. This invoice includes the number of cans of formula redeemed in the month of January for food instruments with a first day of use as of April 1, 2015 – January 31, 2016. The cans of infant formula indicated on this invoice are subject to the rebate levels effective April 1, 2014.

The total amount of rebate due for formula identified as redeemed during January through WIC EBT is **\$4,480,805.05**.

Thank you for your participation in Ohio's sole-source rebate system. If you have any questions, please contact Robert Parker, Program Analysis Supervisor, at (614) 728-2877.

Sincerely,



Michele A. Frizzell, RD, MBA, Chief  
Bureau of Health Services

MAF/MS/ms

Enclosures

cc: Amadou Diallo

<b>Ohio Department of Health</b> <b>Request for Invoice</b>	Program Tracking No. <b>88L00416</b>
--	---

Revenue Reference Number: <b>ABB6</b>	Customer Tax Number:	DOH Customer Reference Number:	Customer P.O. Number:
--	----------------------	--------------------------------	-----------------------

Customer Name and Address:  <b>Abbott Nutrition c/o Faith A. Davis Government Contract Specialist 3300 Stelzer Road Columbus, OH 43219</b>	Instructions:  <b>Complete form and sign before sending to: Accounts Receivable, 4<sup>th</sup> Floor, Attn: Billing Request. Backup information to be sent out with the invoice must be in duplicate: otherwise backup will not be sent.</b>
--	---

Item No. 1	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$4,480,805.05

Customer Contact Person:	
Description of Service: <b>For cans of infant formula redeemed in January 2016 for April 2015 through January 2016.</b>	

Item No. 2	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$

Customer Contact Person:	
Description of Service:	

Item No. 3	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$

Customer Contact Person:	
Description of Service:	

Item No. 4	Revenue Product Code:	Date of Service:	Qty:	Unit Price:	Total:
				\$	\$

Customer Contact Person:	
Description of Service:	

Name/Title of Person Making Request:  <b>Michele A. Frizzell, RD, MBA, Chief Bureau of Health Services</b>	Signature:  <i>Michele A. Frizzell</i>	Date:  <b>2/4/2016</b>
--	--	------------------------------

FROM:  
Ohio Department of Health  
Bureau of Nutrition Services  
246 North High Street, 6th Floor  
Columbus, Ohio 43215

TO:  
Abbott Nutrition  
3300 Stetzer Road  
RP2-2, Dept. 106711  
Columbus, OH 43219

	MONTH												TOTAL DOLLARS
	Apr-Aug CANS	September CANS	October CANS	November CANS	December CANS	January CANS	TOTAL CANS	REBATE	TOTAL DOLLARS				
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	0	34	0	0	856	39,661	40,641	4.1190	\$167,400.28				
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	0	0	0	0	6	870	876	2.8500	\$2,496.60				
1 qt RTF SIMILAC SENSITIVE	0	0	0	0	22	2,303	2,325	2.7850	\$6,475.13				
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	78	87	4	7	4,552	205,057	209,785	13.0650	\$2,740,841.03				
12.4 oz PWD SIMILAC SOY ISOMIL	8	9	4	3	718	39,859	40,601	13.5320	\$549,412.73				
13 oz CONC SIMILAC SOY ISOMIL	4	8	0	0	280	12,077	12,369	4.4080	\$54,522.55				
12.6 oz PWD SIMILAC SENSITIVE	44	0	0	1	1,050	64,517	65,612	12.9620	\$850,462.74				
1 qt RTF SIMILAC SOY ISOMIL	0	0	0	0	1	337	338	3.2950	\$1,113.71				
12.3 oz POWDER SIMILAC for SPIT-UP	8	0	0	0	84	7,869	7,961	13.5320	\$107,728.25				
32 oz RTF SIMILAC for SPIT-UP	0	0	0	0	3	103	106	3.3210	\$352.03				
<b>TOTAL AMOUNT DUE</b>									<b>\$4,480,805.05</b>				

INFANTS SERVED:  
January  
NON-BREASTFED 59,859  
PARTIALLY BREASTFED 2,133  
BREASTFED 6,702  
**TOTAL 68,694**

MONTHLY REBATE TRACKING FORM

	Apr-Aug	September	October	November	December	January	TOTAL
13 oz CONC SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$140.05	\$0.00	\$0.00	\$3,937.76	\$163,322.47	\$163,462.52
1 qt RTF SIMILAC ADVANCE with EARLY SHIELD	\$0.00	\$0.00	\$0.00	\$0.00	\$17.10	\$2,479.50	\$2,479.50
1qt RTF SIMILAC SENSITIVE	\$0.00	\$0.00	\$0.00	\$0.00	\$61.27	\$6,413.86	\$6,413.86
12.4 oz PWD SIMILAC ADVANCE with EARLY SHIELD	\$1,019.07	\$1,136.66	\$52.26	\$91.46	\$59,471.88	\$2,679,069.71	\$2,681,369.15
12.4 oz PWD SIMILAC SOY ISOMIL	\$108.26	\$121.79	\$54.13	\$40.60	\$9,715.98	\$539,371.99	\$539,696.76
13 oz CONC SIMILAC SOY ISOMIL	\$17.63	\$35.28	\$0.00	\$0.00	\$1,234.24	\$53,235.42	\$53,288.31
12.6 oz PWD SIMILAC SENSITIVE	\$570.33	\$0.00	\$0.00	\$12.96	\$13,610.10	\$836,269.35	\$836,852.64
1 qt RTF SIMILAC SOY ISOMIL	\$0.00	\$0.00	\$0.00	\$0.00	\$3.30	\$1,110.42	\$1,110.42
12.3 oz POWDER SIMILAC for SPIT-UP	\$108.26	\$0.00	\$0.00	\$0.00	\$1,136.69	\$106,483.31	\$106,591.56
32 oz RTF SIMILAC FOR SPIT-UP	\$0.00	\$0.00	\$0.00	\$0.00	\$9.96	\$342.06	\$342.06
<b>TOTAL</b>	\$1,823.54	\$1,433.75	\$106.39	\$145.01	\$69,198.28	\$4,388,098.07	\$4,391,606.77



Ohio Department of Health - Bureau of Nutrition Services



ODHWIC0401 - WIC Formula Rebate Invoice Report (Prompted)

FROM:

Ohio Department of Health  
246 North High Street, 6th Fl  
Columbus, Ohio 43215

TO:

Ross Laboratories  
625 Cleveland Avenue  
Columbus, Ohio 43215

EBT Formula Rebates

JAN 2016	Benefit Claim Current Description	Redemption Month	Quantity	Rebate Amount	Final Rebate
21/031 - SIMSOYISOMILPWD 12.4OZ		APR 2015	1	13.532	\$13.53
		JUN 2015	7	13.532	\$94.72
		SEP 2015	9	13.532	\$121.79
		OCT 2015	4	13.532	\$64.13
		NOV 2015	3	13.532	\$40.60
		DEC 2015	718	13.532	\$9,715.98
		JAN 2016	39,859	13.532	\$539,371.99
21/032 - SIMSOYISOMIL 13OZ CONC		MAY 2015	4	4.408	\$17.63
		SEP 2015	8	4.408	\$35.26
		DEC 2015	280	4.408	\$1,234.24
		JAN 2016	12,077	4.408	\$53,235.42
21/034 - SIMSENSITIVE 12.0OZ PWD		MAY 2015	9	12.962	\$116.66
		JUN 2015	14	12.962	\$181.47
		JUL 2015	5	12.962	\$64.81
		AUG 2015	16	12.962	\$207.39
		NOV 2015	1	12.962	\$12.96
		DEC 2015	1,050	12.962	\$13,610.10
21/036 - SIMSENSITIVE 1 QT RTF		JAN 2016	64,517	12.962	\$836,269.35
		DEC 2015	22	2.785	\$61.27
		JAN 2016	2,303	2.785	\$6,413.86
21/071 - SIM SPIT-UP 1 QT RTF		DEC 2015	3	3.321	\$9.96
		JAN 2016	103	3.321	\$342.06
21/082 - SIM ADVANCE 12.4OZ PWD		MAY 2015	6	13.065	\$78.39
		JUN 2015	30	13.065	\$391.95
		JUL 2015	28	13.065	\$365.82
		AUG 2015	14	13.065	\$182.91
		SEP 2015	87	13.065	\$1,136.66




**Ohio Department of Health - Bureau of Nutrition Services**  
**ODHWIC0403 - WICP50A5 Rebated Formula Item Counts Report**  
**EBT Rebated Formula Counts**

**21/031 - SIMSOYISOMIL\_PWD 12.4OZ**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	40,546	873		4	41,423
NOV 2015		41,573	848	3	42,424
DEC 2015			41,887	718	42,605
JAN 2016				39,859	39,859
<b>Total(Benefit Month)</b>	<b>40,546</b>	<b>42,446</b>	<b>42,735</b>	<b>40,584</b>	<b>166,311</b>

**21/032 - SIMSOYISOMIL 13OZ CONC**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	12,398	339			12,737
NOV 2015		12,468	343		12,811
DEC 2015			12,309	280	12,589
JAN 2016				12,077	12,077
<b>Total(Benefit Month)</b>	<b>12,398</b>	<b>12,807</b>	<b>12,652</b>	<b>12,357</b>	<b>50,214</b>

**21/034 - SIMSENSITIVE 12.0OZ PWD**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	63,169	1,247			64,416
NOV 2015		65,977	1,094	1	67,072
DEC 2015			66,731	1,050	67,781
JAN 2016				64,517	64,517
<b>Total(Benefit Month)</b>	<b>63,169</b>	<b>67,224</b>	<b>67,825</b>	<b>65,568</b>	<b>263,786</b>

**21/036 - SIMSENSITIVE 1 QT RTF**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	1,908	81			1,989
NOV 2015		2,142	78		2,220
DEC 2015			2,392	22	2,414
JAN 2016				2,303	2,303
<b>Total(Benefit Month)</b>	<b>1,908</b>	<b>2,223</b>	<b>2,470</b>	<b>2,325</b>	<b>8,926</b>

**21/071 - SIM SPIT-UP 1 QT RTF**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	203	12			215
NOV 2015		173	5		178
DEC 2015			205	3	208
JAN 2016				103	103
<b>Total(Benefit Month)</b>	<b>203</b>	<b>185</b>	<b>210</b>	<b>106</b>	<b>704</b>

**21/082 - SIM ADVANCE 12.4OZ PWD**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	206,216	6,413	11	4	212,644
NOV 2015		212,509	6,007	7	218,523
DEC 2015		214,284	4,552		218,836
JAN 2016			205,057		205,057
<b>Total(Benefit Month)</b>	<b>206,216</b>	<b>218,922</b>	<b>220,302</b>	<b>209,620</b>	<b>855,060</b>

**21/083 - SIMADVANCE 13OZ CONC**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	40,086	1,351			41,437
NOV 2015		42,298	1,205		43,503
DEC 2015		42,081	956		43,037
JAN 2016			39,651		39,651
<b>Total(Benefit Month)</b>	<b>40,086</b>	<b>43,649</b>	<b>43,286</b>	<b>40,607</b>	<b>167,628</b>

**21/085 - SIM SPIT-UP PWD 12.0OZ**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	7,537	146			7,683
NOV 2015		8,113	115		8,228
DEC 2015		8,120	84		8,204
JAN 2016			7,869		7,869
<b>Total(Benefit Month)</b>	<b>7,537</b>	<b>8,259</b>	<b>8,235</b>	<b>7,953</b>	<b>31,984</b>

**21/501 - SIM SOY ISOMIL 1 QT RTF**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	342	6			348
NOV 2015		297	29		326
DEC 2015		255	1		256
JAN 2016			337		337
<b>Total(Benefit Month)</b>	<b>342</b>	<b>303</b>	<b>284</b>	<b>338</b>	<b>1,267</b>

**21/502 - SIM ADVANCE 1 QT RTF**

Quantity	OCT 2015	NOV 2015	DEC 2015	JAN 2016	Total(Process Month)
OCT 2015	1,036	57			1,093
NOV 2015		1,091	43		1,134
DEC 2015		961	6		967
JAN 2016			870		870
<b>Total(Benefit Month)</b>	<b>1,036</b>	<b>1,148</b>	<b>1,004</b>	<b>876</b>	<b>4,064</b>

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