March 15, 2006

MEDICAID DRUG REBATE PROGRAM **RELEASE #140**

For State Medicaid Directors

CHANGE IN DRUG COVERAGE STATUS/DESI CODE CHANGE

States were previously informed, via a state fax that went out on January 19, 2006, of a product for which the DESI code was reported incorrectly. The product is:

- 52152-1090 Meperidine HCL/Promethazine HCL Capsules

Although the labeler of this product provided a DESI Code 2 (safe and effective) for this NDC, the FDA has determined that this drug is less-than-effective, or a DESI Code 5 (Federal Register Notice 46 FR 46404).

Please be aware that this drug will not be eligible for Federal financial participation or rebate billing for any product dispensed beyond March 31, 2006. If your system can process an immediate change, please do so. The 4Q2005 CMS tape will reflect the DESI Code 5 status.

Questions concerning this notice can be referred to an Operations Team member (see page O2 of the Operations Training Guide).

MEDICAID DRUG REBATE DISPUTE RESOLUTION PROGRAM (DRP) NATIONAL MEETING – APRIL 24-28, 2006
Registration Due by April 7, 2006

We are pleased to announce that the next National DRP Meeting will be held April 24-28 in Baltimore, Maryland at the Tremont Plaza Suite Hotel, 222 St. Paul Place. This meeting is a continuation of the highly successful DRP meetings held in Baltimore in recent years.

While this meeting is open to all states and manufacturers, we strongly encourage those with significant amounts in dispute to attend. As in the past, prior planning is absolutely imperative to the success of these meetings; therefore, we are requesting that you register PROMPTLY by sending an email to the DRP email address at: drp@cms.hhs.gov.

When registering, please be sure to include the following information: the name, email address and phone number of each individual attending and the manufacturer (including labeler code) or state that you are representing. Also indicate whether you will be attending the entire week or for just part of the week. Partial week attendees should specify on which days they will be attending. In addition, for each day you are participating, please indicate whether you will be attending both morning and afternoon sessions. For example, someone who is attending both sessions on all days of the conference will indicate that he or she is attending Monday-Friday AM and PM, whereas someone who is only attending the morning sessions on Monday and Tuesday of the conference week will specifically indicate that he or she is attending Monday AM and Tuesday AM only.

Whenever possible, priority scheduling will be afforded those who register earliest. We will ensure that adequate DRP staff is available to conduct the meetings based on your timely responses.

If possible, states should plan on arriving in Baltimore in time to attend a "state-only" meeting with the DRP Team the morning of Monday, April 24. Meeting details and hotel registration information is provided on our web page at http://www.cms.hhs.gov/MedicaidDrugRebateDispR/05_DRPMeetings.asp#TopOfPage

Note: DRP meeting contingent on CMS budget.

AVERAGE MANUFACTURER PRICE (AMP) RECALCULATIONS

Johnson & Johnson – Recalculation of AMP

As a result of modifications in its methodology for the calculation of AMP, Johnson & Johnson will revise the AMPs for the first quarter 2001 through first quarter 2005 for the following Johnson & Johnson's operating labeler codes.

- 00045
- 00062
- 50458
- 50580
- 59676

In many cases the recalculation resulted in reduced rebates to the States. Therefore, beginning with the processing of fourth quarter 2005 invoices for the labeler codes

listed above, Johnson & Johnson will begin recoupment of overpayments. However, to minimize the financial impact on states, revised AMPs will be submitted to CMS on a staggered basis until the overpayments are recovered so as not to reduce rebates by more than 25% quarterly across the respective labeler codes.

A representative for the Johnson & Johnson labeler codes will contact each state representative to inform them of this action. States should continue to invoice Johnson & Johnson for current quarters as usual.

If you have any questions on this particular issue, please call Kim Howell at (410) 786-6762.

DATABASE BACKUP FILES

Please be aware that you should maintain a backup file of your drug rebate database to include all information sent to you on the CMS quarterly URA tape. CMS does not have the resources to respond to URA data requests from the states. In addition, you should maintain a backup file containing your utilization data. CMS can not respond to requests for this data; however, state utilization data is posted on the drug rebate webpage for your convenience.

NON-DRUG DELETIONS FROM MDR

In accordance with previously released state faxes and as part of our continuing effort to remove non-drug items from the Medicaid Drug Rebate (MDR) system, the following products will be deleted from the MDR Master file of covered outpatient drugs effective April 1, 2006. The products are as follows:

49348-0368-10 Insulin Syringe 30 G .3cc
49348-0369-10 Insulin Syringe 30 G 1cc
49348-0370-10 Insulin Syringe 30 G .5cc
49348-0906-10 Syringe 28 G .5cc
49348-0907-10 Syringe 28 G 1cc
49348-0908-10 Syringe 29 G .3cc
49348-0909-10 Syringe 29 G .5cc
49348-0910-10 Syringe 29 G 1cc
52735-0386-01 Insulin Syringe 28 G .5cc
52735-0387-01 Insulin Syringe 28 G 1cc
52735-0389-01 Insulin Syringe 29 G .5cc
52735-0390-01 Insulin Syringe 29 G 1cc
52735-0391-01 Insulin Syringe 29 G 3/10 cc
52735-0392-01 Insulin Syringe 30 G .5cc
52735-0393-01 Insulin Syringe 30 G 1cc
52735-0394-01 Insulin Syringe 30 G 3/10 cc
00536-9915-01 Insulin Syringe Disp. U-100 1cc 28 Gauge
00536-9916-01 Insulin Syringe U-100 ½ cc 28 Gauge x ½
00536-9918-01 Insulin Syringe 1cc 29 x ½ U-100
64899-0919-01 Glucose Test Strip 100
64899-0920-50 Glucose Test Strip 50
00083-0125-30; -47; -74; and -75 Slow Fe

The abovementioned products were not approved as prescription drugs by the Food and Drug Administration under Section 505 or 507 of the Federal Food, Drug, and Cosmetic Act and therefore, do not meet the definition of covered outpatient drugs as defined in Section 1927(k)(2) of the Social Security Act.

NEW WEBPAGE ADDRESS

The Medicaid Drug Rebate Program webpage has been reconstructed and given a new address at: www.cms.hhs.gov/medicaiddrugrebateprogram. Page O2 of the operational training guide has been changed to reflect this new address and is included with this release.

ESTABLISHMENT OF EMAIL ADDRESS FOR OPERATIONAL QUESTIONS

To better serve your needs, CMS has established a new email address for drug rebate operational questions. All drug rebate operational analysts have access to this email box and will retrieve inquiries on a daily basis. Please begin addressing your operational questions to MDROPERATIONS@cms.hhs.gov . Emails to this address will have priority over email and phone inquiries sent to an individual operational analyst's email/voicemail.

TECHNICAL CONTACT EMAIL ADDRESS

We are moving forward with internal system changes to create better communications and information sharing processes with states regarding such things as utilization data. In the interim, we would like to begin gathering the email address for all state technical contacts for drug rebate. Please take a moment and send your email address to our operational email box at MDROPERATIONS@cms.hhs.gov. For future use, page M10 of the operational training guide has been revised to reflect the addition of an email address and is included with this release as an update to the guide.

OFFICE OF INSPECTOR GENERAL (OIG) REPORT "MULTISTATE REVIEW OF MEDICAID DRUG REBATE PROGRAMS" (A-06-03-00048)

The OIG released a report that consolidated the results of previous OIG audits of Medicaid drug rebate programs in 49 States and the District of Columbia. The objective of the audits was to determine whether States had established adequate accountability and internal controls over their Medicaid drug rebate programs. In a State Medicaid Director letter dated December 22, 2005, CMS requested that States carefully review the OIG final report entitled "Multistate Review of Medicaid Drug Rebate Programs" (A-06-03-00048) (http://oig.hhs.gov/oas/oas/cms.html), and take all necessary and appropriate actions to ensure the outstanding Medicaid drug rebate revenues, which are still owed to the States and CMS from the manufacturers, be collected as soon as possible, consistent with the recommendations in this report.

STATE PHARMACEUTICAL ASSISTANCE PROGRAM (SPAP) EXEMPTION FROM MEDICAID BEST PRICE

The Medicaid statute allows manufacturers participating in the Medicaid Drug Rebate Program to exclude prices to SPAPs from their Medicaid Best Price calculations. CMS has compiled a list of programs that meet the criteria to be considered SPAPs. Please note that this list only includes states that submitted a description of their programs to CMS for review based on the established criteria in CMS' Manufacturer Release #68

(April 1, 2005). The qualification of State-only programs as SPAPs is based on the

information provided by the State and may be subject to further review if changes occur within the program. The list can be found on our website at http://www.cms.hhs.gov/MedicaidDrugRebateProgram/02_Overview.asp#TopOfPage. Questions regarding this may be directed to Marge Watchorn at 410-786-4361.

UPDATES TO THE OPERATIONAL TRAINING GUIDE

The following pages have been revised and attached to this release: G11a and b, G12-14, I2, M10, N3, and O2. Please share these pages with the appropriate staff and replace them in your guide.

NEW LABELERS

Labeler Name/Labeler Code	Mandatory Coverage Date	Optional Coverage Date
Red River Pharma Manufacturing, LLC (Labeler code 12593)	04/01/2006	11/14/2005
Trigen Laboratories, Inc. (Labeler code 13811)	04/01/2006	01/09/2006
Tercica, Inc. (Labeler code 15054)	04/01/2006	01/26/2006
Genpharm, L.P. (Labeler code 15330)	04/01/2006	11/29/2005
Esprit Pharma, Inc. (Labeler code 15456)	04/01/2006	11/16/2005
Midland Healthcare, LLC (Labeler code 15686)	04/01/2006	01/11/2006
Pack Pharmaceuticals, L.L.C. (Labeler code 16571)	04/01/2006	01/17/2006

REINSTATED LABELERS

Amkas Laboratories, Inc. (labeler code 61073), has signed a new rebate agreement and is reinstated in the drug rebate program effective 04/01/2006.

Medline Industries, Inc. (labeler code 53329) has signed a new rebate agreement and is reinstated in the drug rebate program effective 04/01/2006. Due to special circumstances, this reinstated labeler has an optional effective of January 23, 2006.

Contact information for new and reinstated labelers is attached for your convenience.

TERMINATED LABELERS

The following labeler code is being terminated effective April 1, 2006:

Colorado Biolabs (Labeler code 67181).

The following labeler codes are being voluntarily terminated effective April 1, 2006:

Bajamar Chemical Company, Inc. (Labeler code 44184); and
Pronova Corporation (Labeler code 67555).

OTHER ATTACHMENT

A copy of the current listing of the 91-day treasury bill auction rates beginning with the period August 9, 2004, is attached.

Please remember to direct your drug rebate questions to MDROperations@cms.hhs.gov

/s/
Edward C. Gendron
Director
Finance, Systems and Budget Group

10 Attachments

cc:
All State Drug Rebate Technical Contacts
All Regional Administrators

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard
Baltimore, Maryland 21244

Dear Technical Contact: You recently submitted product and/or pricing data and received an email summarizing that submission. Attached is the Batch Edit Transaction Report which provides additional details to the email you received. This report identifies problems with your data submission, along with a description of the action taken by the MDR System (rejections or alerts/changes). Please review the report and follow the instructions below that pertain to the specific data problems identified on the report.

Alerts and Rejections

BP is greater than AMP: BP must be equal to or less than AMP. If a BP computes higher than AMP (due to large discounts or unusually high levels of returns), BP must be lowered to equal AMP. The MDR System detected this error and automatically made your BP equal to AMP. Please correct this record on your file so that it matches the CMS file.

DESI Change Attempted: Once baseline data has been established, the DESI code can only be changed under direction of the FDA and by a CMS Operations analyst. The MDR System did not allow this change.

Terminated Package Size messages: The CMS file shows a termination date for this package size. If the termination date is incorrect, correct the error using your normal mode of data transmission.

Changes to BASE AMP are not allowed: Pricing adjustments are not allowed beyond 12 quarters from the quarter in which the data were due. The MDR System did not allow this change.

Market Date change rejected since older than 12 quarters: Adjustments to Market Date are not allowed beyond 12 quarters from the quarter in which the data were due. The MDR System did not allow this change.

Earliest Input Market Date Used: You have attempted to change the Market Date on this package size to a date that is different from the initial date entered with the first package size. MDR did not process this change because the Market Date across all package sizes should be equal to the initial date entered with the first package size.

Product Record Does Not Exist in the File: You attempted to submit pricing for an NDC that does not exist in the MDR System. Pricing will not be accepted on this NDC until the entire baseline product record is submitted to CMS using your normal mode of data transmission.

Package Size Data for this Product Does Not Exist: You attempted to submit pricing for a package size that does not exist in the MDR System. Pricing will not be accepted on this package size until the package size data is submitted to CMS using your normal mode of data transmission.

Market Date/FDA Approval Date: Either the Market Date or the FDA Approval Date (or both) for this NDC was missing from your data submission. Both of these dates are required; therefore, submit both dates using your normal mode of data transmission.

Multiple Package messages:

Product Data Messages - For multiple package size products, the only data fields that may contain varied information are the termination date field, the product name field and the units per package size field.

Pricing Data Messages - AMP and BP must be the same for all package sizes.

For any other messages included on your Batch Edit Transaction Report, but not described above please read the message and make the necessary correction using your normal mode of data transmission.

Please correct the errors identified on the attached report and resubmit the data. You may make the corrections now or with the next quarterly submission.

If you have questions regarding this report, please contact one of the Operations analysts found in section O of your Operational Training Guide.

Sincerely,

Tamara L. Bruce, Technical Director
Drug Rebate Operations, Division of State Systems

Attachments

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-13-15
Baltimore, Maryland 21244-1850

Center for Medicaid and State Operations

Dear Technical Contact:

The attached report, entitled "MISSING PRICING DATA," contains a list of active NDCs for which no pricing was submitted for the quarter specified. As a result, zero Unit Rebate Amounts (URAs) were reported to the states for these NDCs; therefore, you are required to calculate these URAs and include them on the Reconciliation of State Invoice (ROSI) with your quarterly rebate payment to each state. For further information on the ROSI, please refer to section F of the Operational Training Guide.

Many labelers receive this report because they have failed to submit termination dates on NDCs that are no longer active. Termination date is defined as the shelf life of the last lot manufactured or the date that a drug is removed from the market due to safety reasons. Pricing data is due on terminated NDCs for four quarters beyond the termination date.

Under the terms of the rebate agreement, you are required to submit quarterly pricing data on all active NDCs until a termination date (plus four additional quarters of pricing) is received; therefore, you must submit the pricing for the NDCs identified on the attached report and/or submit a termination date with your next quarterly data submission. You also have the option to submit this missing data immediately. Please submit this information using your normal mode of data transmission. Please also note that even if the data in your system looks correct (i.e., does not match what is in the attached report), it does not match the data in CMS's system and requires action on your part.

If you have any questions regarding this report, please contact one of the Operations analysts found in section O of the Operational Training Guide.

Sincerely,

Tamara L. Bruce, Technical Director
Drug Rebate Operations
Division of State Systems

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-13-15
Baltimore, Maryland 21244-1850

Center for Medicaid and State Operations

Dear Technical Contact:

The attached report, entitled "NO REBATES CALCULATED – DATA ERRORS FOUND," contains a list of NDCs for which no Unit Rebate Amounts (URAs) were calculated for single source (S) or innovator multiple source (I) drugs as a result of missing pricing data. Specifically, the report will identify one of two missing pricing error messages.

One error message states, "quarterly AMP missing." When the attached report contains this message, it means that the specified NDC's Average Manufacturer Price (AMP) value was not submitted for the pricing quarter that establishes the Baseline AMP value. In the report, the "pricing quarter" represents the quarter in which the Baseline AMP value is missing and the "period" represents the quarter in which no rebates were calculated because the Baseline AMP value is missing. Because no AMP has been submitted to establish the Baseline AMP for the specified NDCs, no rebates can be calculated for these products. For further information on Baseline AMP, please refer to section H of the Operational Training Guide. In addition to submitting the quarterly AMP to establish the Baseline AMP for the specified NDCs, the corresponding quarterly Best Price (BP) for each drug product must be submitted as well; if not, the data will continue to be rejected.

The other error message states, "No Best Price." When the attached report contains this message, it means that an NDC's BP is missing for the specified period (quarter) and that no rebates were calculated for that particular quarter as a result.

Under the terms of the rebate agreement, you are required to correct the errors identified on the attached report with your next quarterly data submission. You also have the option to submit this missing data immediately. Please submit these corrections using your normal mode of data transmission. Please also note that even if the data in your system looks correct (i.e., does not match what is in the attached report), it does not match the data in CMS's system and requires action on your part.

If you have any questions regarding this report, please contact one of the Operations analysts found in section O of the Operational Training Guide.

Sincerely,

Tamara L. Bruce, Technical Director
Drug Rebate Operations
Division of State Systems

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-13-15
Baltimore, Maryland 21244-1850

Center for Medicaid and State Operations

Dear Technical Contact:

The attached report, entitled "NO REBATES CALCULATED – CURRENT UNIT REBATE AMOUNT > OR < 50% DIFFERENCE," contains a list of NDCs for which no Unit Rebate Amounts (URAs) were calculated for the current quarter as a result of possible pricing errors. Specifically, each NDC on the attached report was submitted to CMS with pricing for this quarter that caused the URA to calculate more than 50% higher or more than 50% lower than the previous quarter. As a result, the CMS Medicaid Drug Rebate (MDR) system identified the prices for these NDCs as possible errors and URAs were not submitted to the states for any of these drug products.

In addition to the NDC, the report contains enough historical product/pricing data (i.e., Baseline AMP, Market Date, AMP and BP for the previous quarter and the current quarter, etc…) for you to evaluate each URA and make corrections where necessary. If you review the attached report and determine that the pricing is correct, there is no need to notify CMS. At that time, you should use the calculated URA found in the last column of the report (entitled "This Quarter Rebate") to compute the total rebate owed to the states for each NDC. After the next quarter's data is processed, CMS will report these URAs to the states as Prior Period Adjustments. If, however, your review of the attached report concludes that the AMP and/or BP is incorrect, please calculate the current quarter's URA based on the correct pricing and use that (corrected) URA when submitting your rebate to the states.

Under the terms of the rebate agreement, you are required to submit accurate pricing to CMS each quarter. Therefore, please review the potential errors identified on the attached report and submit any pricing corrections with your next quarterly data submission. You also have the option to submit pricing corrections immediately. Any corrections must be submitted using your normal mode of data transmission.

If you have any questions regarding this report, please contact one of the Operations analysts found in section O of the Operational Training Guide.

Sincerely,

Tamara L. Bruce, Technical Director
Drug Rebate Operations
Division of State Systems

INTEREST CALCULATION

The following is an overview of the interest provisions of the Medicaid Drug Rebate program. The rebate agreement requires that interest be paid or credited, when due, by the labeler or the state. For purposes of section V(b) of the National Drug Rebate Agreement, the interest rate, as specified in section 1903(d)(5) of the Act, is used. The interest rate is based on the yield of the Weekly 90-Day Treasury Bill Auction Rates. The investment yield is considered the bond equivalent rate or the true discount rate.

Auctions of 90-day Treasury bills are generally held each Monday. If Monday is a holiday, the Treasury Department decides whether to hold the auction on the preceding Friday or the following Tuesday. Information on the T-Bill rates is provided to states and labelers in two ways: 1) it is on the Medicaid drug rebate website at www.cms.hhs.gov/medicaiddrugrebateprogram and is updated monthly; and 2) it is included in periodic state and labeler releases. For the complete listing of T-Bill rates, as published by the Treasury Department, go to: www.publicdebt.treas.gov/of/ofaucrt.htm. Then go to Recent Treasury Bill Auction Results Table.

Interest Due States

1. States are due interest on all unpaid disputed rebate payments that are resolved in the state's favor through dispute resolution. A **dispute** occurs when a labeler disagrees on a specific number of its drug's units reported by the state, and provides detailed written notification of the dispute on the ROSI or PQAS. A labeler that has not paid for the disputed units that are resolved in the state's favor must pay interest that begins accruing on the 38th calendar day from the date the state receives notification from the labeler as evidenced by the postmark. Interest stops accruing and is calculated up to the postmark date of the labeler's mailed check.

   To avoid paying interest on disputes resolved in the state's favor, CMS encourages labelers to pay for disputed units timely. (See section K of the guide for more information on the dispute program.)

MEDICAID DRUG REBATE PROGRAM
STATE AGENCY CONTACT FORM

STATE AGENCY NAME

TECHNICAL CONTACT – Person responsible for sending and receiving data.

NAME OF CONTACT

AREA PHONE NUMBER EXTENSION

FAX AREA PHONE NUMBER EXTENSION

EMAIL ADDRESS _____

NAME OF FISCAL AGENT (if applicable)

STREET ADDRESS

CITY STATE ZIP CODE

PROGRAM POLICY CONTACT – Person responsible for policy decisions.

NAME OF CONTACT

AREA PHONE NUMBER EXTENSION

NAME OF FISCAL AGENT (if applicable)

STREET ADDRESS

CITY STATE ZIP CODE

OBTAINING COPIES OF PROGRAM RELEASES

Generally, within a week of issuing a release to either state agencies or drug labelers, CMS uploads the release to its website.

The program releases are available at the drug rebate website:

www.cms.hhs.gov/medicaiddrugrebateprogram

.**NOTE:** CMS no longer provides the drug rebate releases for incorporation to the CD-ROM.

The following pages show examples of the text of a state and manufacturer release.

CMS DRUG REBATE PROGRAM

Area Code 410

OPERATIONS

Operational Inquiries	MDROPERATIONS@cms.hhs.gov	
Cindy Bergin	786-1176	cindy.bergin@cms.hhs.gov
Tamara Bruce	786-1519	tamara.bruce@cms.hhs.gov
Chris Holmes	786-3328	christene.holmes@cms.hhs.gov
Karen Leshko	786-1291	karen.leshko@cms.hhs.gov
Sue Williams	786-3334	susan.williams@cms.hhs.gov

DIVISION OF PHARMACY (POLICY)

Kim Howell	786-6762
Madlyn Kruh	786-3239
Bernadette Leeds	786-9463
Christina Lyon	786-3332
Larry Reed (Technical Director)	786-3325
Yolanda Reese	786-9898
Gail Sexton	786-4583
Marge Watchorn	786-4361

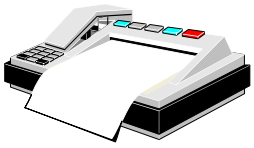
SYSTEM MAINTENANCE

E-mail inquiries to: MDRtech@cms.hhs.gov

DISPUTE RESOLUTION PROGRAM

Sue Gaston	786-6918	susan.gaston@cms.hhs.gov
Tamara Bruce	786-1519	tamara.bruce@cms.hhs.gov
Diane Dunstan	303-844-7040	diane.dunstan@cms.hhs.gov

FAX



786-0390 – Operations
786-5882 or 786-9004 - Policy

WEBSITE www.cms.hhs.gov/medicaiddrugrebateprogram

WEEKLY U.S. T-BILL INVESTMENT RATE

weekly 91-day treasury bill auction rates

Date of Auction	Invest. Rate	Date of Auction	Invest. Rate	Date of Auction	Invest. Rate
08-09-04	1.497	03-07-05	2.767	10-03-05	3.606
08-16-04	1.498	03-14-05	2.792	10-11-05	3.714
08-23-04	1.541	03-21-05	2.859	10-17-05	3.875
08-30-04	1.607	03-28-05	2.839	10-24-05	3.942
09-06-04	1.663	04-04-05	2.792	10-31-05	3.983
09-13-04	1.671	04-11-05	2.767	11-07-05	3.963
09-20-04	1.716	04-18-05	2.864	11-14-05	4.004
09-27-04	1.741	04-25-05	2.941	11-21-05	4.034
10-04-04	1.716	05-02-05	2.931	11-28-05	3.994
10-12-04	1.711	05-09-05	2.911	12-05-05	4.025
10-18-04	1.803	05-16-05	2.859	12-12-05	3.911
10-25-04	1.890	05-23-05	2.957	12-19-05	3.988
11-01-04	1.987	05-31-05	2.998	12-26-05	3.999
11-08-04	2.084	06-06-05	3.029	01-02-06	4.169
11-15-04	2.115	06-13-05	3.039	01-09-06	4.252
11-22-04	2.197	06-20-05	3.029	01-17-06	4.377
11-29-04	2.380	06-27-05	3.147	01-23-06	4.397
12-06-04	2.253	07-05-05	3.214	01-30-06	4.485
12-13-04	2.243	07-11-05	3.204	02-06-06	4.485
12-20-04	2.223	07-18-05	3.292	02-13-06	4.553
12-27-04	2.269	07-25-05	3.420	02-21-06	4.563
01-03-05	2.320	08-01-05	3.477	02-27-06	4.625
01-10-05	2.376	08-08-05	3.539		
01-18-05	2.407	08-15-05	3.549		
01-24-05	2.366	08-22-05	3.539		
01-31-05	2.525	08-29-05	3.575		
02-07-05	2.530	09-06-05	3.513		
02-14-05	2.592	09-12-05	3.529		
02-22-05	2.669	09-19-05	3.575		
02-28-05	2.772	09-26-05	3.518		

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