



September 16, 2014

Montana Health Care Programs Notice

Pharmacy Providers

2014 Annual Montana Dispensing Fee Survey

The Annual Montana Dispensing Fee Questionnaire, required by the Administrative Rule (ARM) 37.86.1105, will be mailed to all enrolled in-state pharmacy providers in the near future. The survey is also posted on the Pharmacy webpage at [2014 Annual Montana Dispensing Fee Survey](#).

The Department must understand pharmacies' true cost of dispensing prescriptions as this is an important factor in assessing the reimbursement needed to sustain a strong network of pharmacies able to serve Montana Medicaid members.

Important Information

- A separate survey for each Montana pharmacy is required.
- For new providers, the survey should be completed and based on six months of operation.
- Failure to respond to the survey will result in an assignment to your pharmacy of the minimum dispensing fee of \$2.00 as stated in ARM 37.86.1105 (2)(a) and (3).
- If your pharmacy's calculated cost to dispense a prescription is less than the established dispensing fee for Montana Medicaid, then the lesser dispensing fee will be applied in the computation of the payment.

Contact Information

If you have any questions, please contact Katie Hawkins at 406-444-2738 or khawkins@mt.gov.

For claims questions or additional information, contact Provider Relations at 1-800-624-3958 (toll-free, in/out of state) or 406-442-1837 (Helena) or via e-mail at MTPRHelpdesk@xerox.com.

Visit the Montana Medicaid Provider Information website at <http://medicaidprovider.hhs.mt.gov>.