



Montana Healthcare Programs Provider Notice

May 14, 2025

Effective May 1, 2025

Informational

Pharmacy Providers

2025 Average Acquisition Cost (AAC) Survey

In accordance with Administrative Rules of Montana ([ARM](#)) [37.86.1106 \(b\)](#), the Department requests that surveyed pharmacies enrolled in Montana Healthcare Programs Outpatient Prescription Drug Program to participate in a survey of acquisition cost data for prescription and non-prescription medications dispensed to Montana Healthcare Program members.

This survey will be used to update AAC rates for outpatient drugs. Pharmacy participation is essential. It is pharmacies' best opportunity to ensure the AAC program is fair and equitable to their business.

The 2025 survey will be open for participation May 1, 2025 through May 31, 2025.

For this survey, pharmacies need to provide all wholesaler, distributor, or manufacturer invoices for all brands; generics; and over-the-counter (OTC) drug purchases for the entire month of April 2025. **This survey must be mailed or sent electronically to :**

Method	Information
Email	To: Pharmacy@mslc.com Subject: Montana Pharmacy Survey
Fax	(317) 566-3203 Attn: Montana Pharmacy Survey
Mail	Myers and Stauffer LC Attn: Montana Pharmacy Survey 800 East 96th Street, Suite 200 Indianapolis, IN 46240-6419

The records being requested are to be limited to **drug ingredient costs only**. All costs that are not drug ingredient costs, such as those for shipping, storage, warehousing, or other administrative costs are not to be included. If the pharmacy has both 340B and non-340B inventory, please ensure only non-340B invoices are submitted. Copies or electronic files of records are preferred, as information submitted will not be returned.

Information can be submitted in printed or electronic format and should include the following:

1. National Drug Code (NDC)
2. Purchase price of drug (drug ingredient cost only)
3. Quantity purchased
4. Purchase date for each product
5. Item number to-NDC crosswalk, if item numbers or other proprietary nomenclature are used on your invoices
6. Invoice/purchase record source (e.g., wholesaler/manufacturer name)

In most cases, pharmacy wholesalers will be able to compile this information and may provide the files directly to the Myers and Stauffer LC address above. Please contact the Myers and Stauffer provider help desk (800) 591-1183 should you have any questions.

Contact and Website Information

If you have questions, please contact:

- Pharmacy Program Officer, (406) 444-2738, email Joshua.Surginer@mt.gov
- Pharmacy Section Supervisor, (406) 444-2768, email DFeist@mt.gov

For claims questions or additional information, contact Montana Provider Relations at (800) 624-3958 or (406) 442-1837 or email [Montana Provider Relations Helpdesk](#).

Visit the [Montana Healthcare Programs Provider Information website](#) to access your provider type page. Choose Resources by Provider Type in the left-hand menu.

Visit the [Contact Us page](#) on the Provider Information website for additional DPHHS contact numbers.