New Hampshire ADAP
Maximum Allowable Cost Price Research Request Form

By submitting this form, I am requesting that Prime Therapeutics State Government Solutions research the New Hampshire (NH) ADAP Maximum Allowable Cost (MAC) list price of the drug listed on this form and respond about product availability or a price modification based on information provided in the **Comments** section below.

*** DENOTES REQUIRED FIELDS**

*** Request Date (MM/DD/YYYY):**

/ /

PHARMACY INFORMATION

Pharmacy Name:

Contact Last Name: **Contact First Name:**

NPI Number:

Phone Number: – – **Fax Number:** – –

DRUG INFORMATION

Drug Name:

Drug Strength: *** Drug Dosage Form:**

*** NDC Number:** – – **Recipient ID Number:**

*** Rx Number:** *** Provider Acquisition Cost:** *** Dispense as Written (DAW) Code:**

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Quantity Dispensed: *** Date of Service** / /

Comments:

Prime Therapeutics State Government Solutions Use Only – Do Not Mark in This Area
Response Date:
Response:

Return this form with a copy of the invoice listing the current acquisition cost to:
Prime Therapeutics State Government Solutions LLC
Attn: MAC Department
Fax: 1-888-656-1951 or email: StateMACProgram@primetherapeutics.com

Note: Processing may be delayed if information submitted is illegible or incomplete.

Phone: 1-866-675-7755 **Fax**: 1-888-603-7696

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