

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201024 JULY 27, 2010



Required pharmacy documentation for desk reviews and on-site audits

The Indiana Family and Social Services Administration (FSSA) has contracted with Health Management Services (HMS) to perform retrospective pharmacy audits of Indiana Health Coverage Programs (IHCP) pharmacy providers. This function was previously performed by Prudent Rx; however, in September 2008, Prudent Rx was purchased by HMS.

This bulletin notifies pharmacy providers about acceptable forms of documentation that can be submitted for desk reviews and on-site audits. The following outlines the types of documentation HMS accepts for desktop and on-site pharmacy audits effective with audit cycles starting in August 2010. Desk audits are designed to recover overpayments that are primarily due to billing errors made by pharmacy providers and to educate providers to prevent errors in future pharmacy claim submissions. The on-site audit reviews claims and the facility site to ensure that policies and procedures are in place, and ensures the collection of usual and customary (U&C) charges. The documentation requirement is the same for both desk reviews and on-site audits.

For long-term care (LTC) pharmacies, HMS accepts only the documentation outlined below. The *National Association of Board of Pharmacy (NABP)/American Society of Consultant Pharmacists (ASCP) Joint Report: Model Rules for Long Term Care Pharmacy Practice* outlines the definition of a drug order to include chart orders.

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Required pharmacy documentation

New prescriptions

- Original written order or prescription from the prescriber
- Telephoned prescription or drug order called in by the prescriber or the prescriber's representative
- Faxed prescription or drug order
- Discharge orders

Refill prescriptions

- May provide a signed Monthly Physician's Order Summary (POS) dated within the previous 12 months of the fill date if open ended. If POS shows a range or stop date, that range or stop date prevails over the 12-month limitation outlined.
- May provide a signed post-dated Monthly POS, as long as it shows the start date and the start date encompasses or is prior to the fill date being audited. POS must show the same drug, strength, and directions as the claim being audited.
- Medication Administration Records (MAR) will be accepted in lieu of a POS, as long as it has all the elements of a valid prescription order.
- Faxed refill authorization containing all relevant information (patient name, date, drug name and strength, directions for use, physician's name, and signature of authorizing agent).



For retail pharmacies, HMS accepts only the documentation outlined below.

- Original written prescription from the prescriber or the prescriber's representative
- Telephoned prescription called in by the prescriber or the prescriber's representative
- Scanned computer image of the original prescription
- Computer/fax refill authorization containing all relevant information
- Faxed prescription
- E-prescription
- Telephone refill authorization containing required elements

Required elements of a prescription include the patient's full name, date prescribed, drug name, strength, quantity, directions for use, refills if applicable, and physician's signature or information, if not written.

If you have questions about acceptable forms of documentation, contact the HMS Audit Department at 1-866-642-0622 or (310) 642-1700, 8 a.m. – 7:30 p.m.; or e-mail pharmacyaudit@hms.com.