

May 11, 2005

Montana Medicaid Notice

Pharmacy Providers

Pharmacy Reviews

Effective Immediately

In order to meet program requirements, the Department has contracted with Prudent Rx, Inc. to conduct on-site and retrospective desktop pharmacy reviews. This program is designed to ensure compliance with program parameters. In addition, this review process will detect billing errors submitted by your pharmacy.

As a Medicaid provider, you have signed an agreement to maintain and furnish to the Department requested records. Also, each Medicaid recipient has signed an HCS 101, (formerly PHHS-FA-20) form authorizing the Department to obtain medical information from medical providers. The Department, in accordance with the relevant laws, will use the acquired information solely for purposes directly connected with the administration of public assistance. The Department will release confidential information only as authorized by law.

Upon conducting retrospective desktop reviews, your pharmacy will be notified by Prudent Rx and requested to provide copies of specific prescriptions and/or other substantiating data. Upon review of the documentation, you will be notified of the results, in writing, specifying any adjustments that may be applied.

Areas of retrospective desktop review will include, but will not be limited to:

- DAW Parameters
- Duplicate Therapy / Prescriptions
- Excessive Quantity Dispensed for Days Supply Limitations
- Early Refill
- Drug Billed is Different Than That Dispensed
- Possible Rx Splitting
- Package Billing Errors
- Valid Prescriptions

Upon conducting an on-site review, your pharmacy will be notified in writing and by telephone in advance of the audit. The only preparation required for this review is to ensure that the signature logs and prescriptions for the date range of the audit, as indicated on the notification letter, are readily available. A pre-selected number of prescriptions will be reviewed. Areas of on-site prescription evaluations will include, but will be limited to:

- DAW Notations
- Hard Copy Prescription
- Signature Logs
- Drug Prescribed / Dispensed
- Prescribing Physician
- Montana Medicaid Program Parameters

In addition, the auditor will also perform a compliance review noting current licensures, pharmacy staff, stock on-hand, general cleanliness of the pharmacy, hours of operation, etc.

Contact Information

If you have any questions please contact Prudent Rx's Audit Department at 800-530-4132 in state or 310-642-1700 for out of state providers, or you can contact the Department at 406-444-4540. Thank you for your continued cooperation.

For claims questions or additional information, contact Provider Relations:

Provider Relations in Helena and out-of-state: (406) 442-1837

In-state toll-free: 1-800-624-3958

Visit the Provider Information website:

<http://www.mtmedicaid.org>

Montana Medicaid Central Script Review Audit Frequently Asked Questions

Contact Information

Organization	Phone Numbers & Fax Numbers	Mail Address	Service Hours
Prudent Rx Audit Department	Ph. (800) 530-4132 (in state) Ph. (310) 642-1700 (out of state) Fx. (877) 698-6873 (in state) Fx. (310) 642-1701 (out of state)	Prudent Rx Audit Department - MT Medicaid 100 Corporate Pointe, Suite 395 Culver City, CA 90230	Monday – Friday 8:00 am – 5:00 pm (PT)
ACS Provider Relations	Ph. (800) 624-3958 (in state) Ph. (406) 442-1837 (out of state)	ACS Montana Medicaid Project 34 N. Last Chance Gulch, Suite 200 Helena, MT 59601	Monday – Friday 8:00 am – 5:00 pm (MT)
ACS Point of Sale Help Desk	Ph. (800) 364-4944		6:00 am – 12:00 am Monday – Saturday 10:00 am – 9:00 pm Sunday (ET)
Montana DPHHS	Ph, (406) 444 4540		Monday – Friday 8:00 am – 5:00 pm (MT)

Topic or Issue	Question	Answer
<i>Audit Processes and Specific Audited Claim Questions</i>	<i>Audit Responses – Contact</i> <i>Can I call Prudent Rx with the information about the prescription in question?</i>	All audit responses must be sent to Prudent Rx in writing. You may either fax them to Prudent Rx or send them to the address indicated on the letter. Auditors cannot accept verbal responses to audit requests. Auditors cannot accept verbal appeals to findings; all appeals must be submitted in writing, as directed in the results letter.
	<i>Documentation Requested</i> <i>Exactly what documentation is being requested or is required for each prescription?</i>	Typically, the documentation requested is a copy of the original prescription form that you have on file for this claim. The initial request letter has several check boxes on the right-hand side indicating the actual information being requested. If you should have any further questions, please call the Audit Department at Prudent Rx.

Montana Medicaid Central Script Review Audit Frequently Asked Questions

<i>Topic or Issue</i>	<i>Question</i>	<i>Answer</i>
	<i>Identifying the Prescriptions</i> <i>The prescription number on the audit form is different from what's in my system.</i>	Some pharmacies are submitting prescriptions to ACS for processing that contain a 9-digit pharmacy number. The NCPDP 5.1 standard allows only a 7-digit number to be transmitted. Please provide the prescriptions for the requested claims.
	<i>Receipt of Response</i> <i>Did you receive my audit response (either via mail or fax)?</i>	Please call Prudent Rx to request the status of your audit response. Pharmacies are notified of all audit findings that result in the recovery of money, and are provided an opportunity to appeal all findings.
	<i>Duplicate Audit Request</i> <i>We have already responded to this audit request, why am I receiving another request?</i>	As part of the audit process, your pharmacy may receive a series of letters including an initial request letter, a results letter, and possibly an administrative review results letter if your pharmacy appealed any of the audit findings. If you have received an exact duplication of a request for documentation, please call the Audit Department at Prudent Rx.
	<i>Submission Deadlines</i> <i>What is the deadline for the submission of my audit responses?</i>	Copies of all requested prescriptions and/or any additional documentation must be provided within 30 calendar days from the date of the audit letter. Please refer to your most recent audit letter for the submission deadline date.
	<i>Audit Codes</i> <i>What does this audit code mean?</i>	The audit results letter you receive has a legend printed at the bottom that defines the audit code determination assigned to each claim.
	<i>Audit Findings or Results</i> <i>What should I do if I have a question about the audit findings?</i>	If you are unsure of what information is being requested, or if you have a question about an audit code, you may call the Audit Department at Prudent Rx.
	<i>Audit Periods</i> <i>Will the process continue to be a quarterly audit process?</i>	In the future, the audits will become a monthly process.
<i>Audit Adjustments & Interest Calculations</i>	<i>Recalculated Payment Amounts</i> <i>Who should I call if I have a question about how the claim was reprocessed or the amount of the payment for the claim?</i>	Call ACS Provider relations. ACS will respond to your inquiry within 1 business day.
	<i>Reprocessing of Adjusted Claims</i> <i>If a claim is being reprocessed, who should I call to find out when the claim will be reprocessed?</i>	Call ACS Provider Relations. ACS will respond to your inquiry within 1 business day.

**Montana Medicaid Central Script Review Audit
Frequently Asked Questions**

<i>Topic or Issue</i>	<i>Question</i>	<i>Answer</i>
	<i>Identifying the Claim</i> <i>What if this claim looks different than the claim I originally submitted?</i>	Contact ACS Provider Relations. ACS will respond to your inquiry within 1 business day.
<i>Appeals Process & Recoupment of Funds Process</i>	<i>Disagree with Audit Findings</i> <i>What do I do if I disagree with the findings?</i>	All Montana Medicaid audits include an appeal process. If you disagree with the audit findings, you have 30 calendar days from the date of the results letter to request an administrative review with Prudent Rx. The directions and address for filing an administrative review are detailed in your audit results letter. If you disagree with the administrative review findings, you have 30 calendar days from the date of the administrative review results letter to request a fair hearing with the State of Montana.
	<i>Recoupment of Funds Process</i> <i>How are funds recouped?</i>	Funds will be recouped through the use of an electronic file Prudent Rx will send to ACS when audit results are final. Overpayment amounts will be deducted from a future check.
<i>Resubmission of Recovered Claims</i>	<i>What is the process to resubmit a claim that has been recovered in full?</i>	Not all claims are eligible for resubmission, but claims that do qualify, if less than a year old, may be resubmitted on line via the point of sale terminal or by paper media. If the claim is more than a year old, the claim is subject to timely filing rules. The clean claim must be submitted to the Department complete with any supporting documentation and an explanation of why the timely filing edit must be bypassed.
<i>HIPAA Issues</i>	<i>Does Prudent Rx have written authorization from the patients to receive copies of the prescriptions?</i>	The Department has authority to conduct audits and review records, including prescriptions.