SPONSOR SUBSTITUTE FOR SENATE BILL NO. 8

IN THE LEGISLATURE OF THE STATE OF ALASKA

TWENTY-EIGHTH LEGISLATURE - FIRST SESSION

BY SENATOR EGAN

Introduced: 2/22/13

Referred: Labor and Commerce, State Affairs

A BILL

FOR AN ACT ENTITLED

- 1 "An Act establishing procedures and guidelines for auditing pharmacy records; and
- 2 providing for an effective date."

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

- * **Section 1.** AS 08.80 is amended by adding a new section to read:
- Sec. 08.80.477. Pharmacy audits. (a) When an audit of the records of a
- 6 pharmacy licensed in this state is conducted by an insurer, managed care company,
- 7 hospital or medical service corporation, third-party payor, or pharmacy benefits
- 8 manager,
- 9 (1) for each audit cycle, the auditor shall provide the pharmacy or
- pharmacist with notice of the audit at least two weeks before conducting the initial on-
- site audit;
- 12 (2) unless the pharmacy and the auditor agree otherwise, the audit may
- not be scheduled to occur during the first five business days of a month because of the
- high volume of prescriptions that are filled during that time;

| 1 | (3) an insurer, managed care company, hospital or medical service |
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| 2 | corporation, third-party payor, or pharmacy benefits manager may not conduct an |
| 3 | audit within 90 days after an audit in which no errors were found; in this paragraph, |
| 4 | "error" does not mean a clerical error, record-keeping error, or typographical error, |
| 5 | unless the auditor |
| 6 | (A) reasonably determines that the error was intentional; or |
| 7 | (B) identifies a pattern of errors; |
| 8 | (4) the audit of a claim must occur within two years after the date the |
| 9 | claim was submitted; |
| 10 | (5) if the audit involves clinical or professional judgment, the audit |
| 11 | shall be conducted by or in consultation with a pharmacist licensed in this or another |
| 12 | state; |
| 13 | (6) the auditor shall, on behalf of the same audit client, audit each |
| 14 | pharmacy using the same standards and parameters as other similarly situated |
| 15 | pharmacies; |
| 16 | (7) the auditor may not use the accounting practice of extrapolation to |
| 17 | establish an overpayment or underpayment or for calculating recoupment or penalties; |
| 18 | (8) a finding by the auditor of overpayment or underpayment shall be |
| 19 | based on an actual overpayment or underpayment and may not be based on a |
| 20 | projection based on the number of patients served who have a similar diagnosis or on |
| 21 | the number of similar orders or refills for similar drugs; |
| 22 | (9) calculation by the auditor of an overpayment may not include |
| 23 | dispensing fees for a prescription that was dispensed to the patient if any portion of the |
| 24 | claim and associated dispensing fee is payable by an insurer, managed care company, |
| 25 | hospital or medical service corporation, third-party payor, or pharmacy benefits |
| 26 | manager under the terms of the contract, except when the claim is fraudulent, the |
| 27 | prescription was dispensed as the result of a dispensing error by the pharmacy, or the |
| 28 | identified overpayment is based solely on an extra dispensing fee; |
| 29 | (10) the auditor may not assess a charge-back, recoupment, or other |
| 30 | penalty against a pharmacy solely because a prescription is mailed or delivered at the |
| 31 | request of a patient as part of a routine business practice of the pharmacy; |

| 1 | (11) to the extent that an audit finds cieffcal of fecord-keeping errors in |
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| 2 | a required document or record, the pharmacy may not be subject to recoupment unless |
| 3 | the clerical or record-keeping error results in actual financial harm to an insurer, |
| 4 | managed care company, hospital or medical service corporation, third-party payor, |
| 5 | pharmacy benefits manager, or customer; |
| 6 | (12) the auditor shall deliver the preliminary audit report to the |
| 7 | pharmacy within 120 days after the completion of the audit; |
| 8 | (13) interest may not accrue to either party during the audit period, |
| 9 | beginning from the notice of audit and ending at the conclusion of the appeal process, |
| 10 | if any; |
| 11 | (14) a pharmacy shall be allowed at least 30 days following receipt of |
| 12 | a preliminary audit report to produce documentation to address a discrepancy found |
| 13 | during the audit; a pharmacy may use any authentic and verifiable statement or record, |
| 14 | including a medication administration record of a nursing home, assisted living |
| 15 | facility, hospital, physician or other health care provider, or other written or electronic |
| 16 | record, to validate a pharmacy record; |
| 17 | (15) the insurer, managed care company, hospital or medical service |
| 18 | corporation, third-party payor, or pharmacy benefits manager shall establish a written |
| 19 | appeal process by which a pharmacy may appeal an unfavorable audit; |
| 20 | (16) the auditor shall deliver the final audit report to the pharmacy |
| 21 | within 90 days after receipt of the pharmacy's response to the preliminary report; |
| 22 | (17) the auditor may not receive compensation based on the percentage |
| 23 | of the amount recovered by the auditor; |
| 24 | (18) the auditor shall provide a copy of the final report to a health |
| 25 | benefit plan sponsor affected by the audit if requested by the plan sponsor; |
| 26 | (19) patient information accessed in the course of an audit shall be kept |
| 27 | confidential and may not be used for marketing purposes. |
| 28 | (b) This section does not apply to |
| 29 | (1) a criminal investigation; or |
| 30 | (2) state Medicaid programs. |
| 31 | (c) In this section, "health benefit plan" has the meaning given in |

- 1 AS 21.54.500.
- * Sec. 2. The uncodified law of the State of Alaska is amended by adding a new section to
- 3 read:
- 4 APPLICABILITY. This Act applies to pharmacy audits conducted on or after the
- 5 effective date of this Act.
- 6 * Sec. 3. This Act takes effect January 1, 2014.