



335400

LEGISLATIVE ACTION

Senate	.	House
Comm: WD	.	
03/17/2014	.	
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The Committee on Regulated Industries (Thrasher) recommended the following:

**Senate Amendment (with title amendment)**

Delete lines 32 - 52  
and insert:

(e) To use the records of a hospital, physician, or other authorized practitioner, which are transmitted by any means of communication, to validate the pharmacy records in accordance with state and federal law.

(f) To be reimbursed for a claim that was retroactively denied for a clerical error, typographical error, scrivener's



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11 error, or computer error if the prescription was properly and  
12 correctly dispensed, unless a pattern of such errors exists,  
13 fraudulent billing is alleged, or the error results in actual  
14 financial loss to the entity. For the purposes of this section,  
15 a prescription is properly and correctly dispensed if the  
16 pharmacy dispenses the correct drug to the correct patient with  
17 the correct issuing directions.

18 (g) To receive the preliminary audit report within 120 days  
19 after the conclusion of the audit.

20 (h) To produce documentation to address a discrepancy or  
21 audit finding within 10 business days after the preliminary  
22 audit report is delivered to the pharmacy.

23 (i) To receive the final audit report within 6 months after  
24 receiving the preliminary audit report.

25 (j) To have recoupment or penalties based on actual  
26 overpayments and not according to the accounting practice of  
27 extrapolation.

28 (2) The Office of Insurance Regulation shall investigate a  
29 complaint received from a pharmacy which alleges a willful  
30 violation of this section by an entity conducting an audit of  
31 the pharmacy on behalf of a managed care company or insurance  
32 company regulated by the office. Such complaint must be in  
33 writing, signed by an authorized representative of the affected  
34 pharmacy, and contain ultimate facts that demonstrate a  
35 violation of this section. A violation of this section is an  
36 unfair claim settlement practice as described in s.  
37 641.3903(5)(c)1. and 4., enforceable against the entity as  
38 provided in part I of chapter 641 and s. 626.9521.  
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40 ===== T I T L E A M E N D M E N T =====

41 And the title is amended as follows:

42       Delete lines 5 - 8

43 and insert:

44       are conducted by certain entities; requiring the  
45       office to investigate complaints alleging a violation  
46       of pharmacy rights; providing that a willful violation  
47       of such rights is an unfair claim settlement practice;  
48       exempting audits in which fraudulent activity is  
49       suspected or which are related to Medicaid claims;