



694642

LEGISLATIVE ACTION

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

Senate Amendment (with title amendment)

Delete lines 32 - 55

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.

39 (3) The rights contained in this section do not apply to



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40 audits in which fraudulent activity is suspected or to audits
41 related to fee-for-service claims under the Medicaid program.

42
43 ===== T I T L E A M E N D M E N T =====

44 And the title is amended as follows:

45 Delete lines 5 - 8

46 and insert:

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