03/17/2014



LEGISLATIVE ACTION

Senate House Comm: WD

The Committee on Regulated Industries (Galvano) recommended the following:

Senate Amendment (with title amendment)

Delete lines 32 - 52

and insert:

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- (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

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denied for a clerical error, typographical error, scrivener's error, or computer error if the prescription was properly and correctly dispensed, unless a pattern of such errors exists or fraudulent billing is alleged and unless the error results in actual financial loss to the plan sponsor. For the purposes of this provision, a prescription is properly and correctly dispensed if the drug is correct, the issuing directions are correct, and the drug is dispensed to the correct patient. (g) To receive the preliminary audit report within 120 days after the conclusion of the audit. (h) To produce documentation to address a discrepancy or audit finding within 10 business days after the preliminary audit report is delivered to the pharmacy. (i) To receive the final audit report within 6 months after receiving the preliminary audit report. (j) To have recoupment or penalties based on actual overpayments and not according to the accounting practice of extrapolation. (2) A willful violation of this section is an unfair claim settlement practice as described in s. 641.3903(5)(c)1. and 4., enforceable as provided under part I of chapter 641 and s. 626.9521. ======= T I T L E A M E N D M E N T ========== And the title is amended as follows: Delete lines 5 - 8 and insert:

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are conducted by certain entities; providing that a willful violation of such rights is an unfair claim



39	settlement practice; exempting audits in which
40	fraudulent activity is suspected or which are related
41	to Medicaid claims;