1	A bill to be entitled
2	An act relating to pharmacies and pharmacy benefit
3	managers; transferring, renumbering, and amending s.
4	465.1885, F.S.; revising the entities conducting
5	pharmacy audits to which certain requirements and
6	restrictions apply; authorizing audited pharmacies to
7	appeal certain findings; providing that health
8	insurers and health maintenance organizations that
9	transfer certain payment obligation to pharmacy
10	benefit managers remain responsible for specified
11	violations; amending s. 624.490, F.S.; providing a
12	penalty for failure to register as pharmacy benefit
13	managers under certain circumstances; providing an
14	effective date.
15	
16	Be It Enacted by the Legislature of the State of Florida:
17	
18	Section 1. Section 465.1885, Florida Statutes, is
19	transferred, renumbered as section 624.491, Florida Statutes,
20	and amended to read:
21	<u>624.491</u> 465.1885 Pharmacy audits; rights
22	(1) <u>A health insurer or health maintenance organization</u>
23	providing pharmacy benefits through a major medical individual
24	or group health insurance policy or a health maintenance
25	contract, respectively, must comply with the requirements of
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26	this section when the health insurer or health maintenance
27	organization or any person or entity acting on behalf of the
28	health insurer or health maintenance organization, including,
29	but not limited to, a pharmacy benefit manager as defined in s.
30	624.490(1), audits the records of a pharmacy licensed under
31	chapter 465. The person or entity conducting such audit must $rac{1f}{}$
32	an audit of the records of a pharmacy licensed under this
33	chapter is conducted directly or indirectly by a managed care
34	company, an insurance company, a third-party payor, a pharmacy
35	benefit manager, or an entity that represents responsible
36	parties such as companies or groups, referred to as an "entity"
37	in this section, the pharmacy has the following rights:
38	(a) Except as provided in subsection (3), notify the
39	pharmacy To be notified at least 7 calendar days before the
40	initial onsite audit for each audit cycle.
41	(b) <u>Not schedule an</u> To have the onsite audit <u>during</u>
42	scheduled after the first 3 calendar days of a month unless the
43	pharmacist consents otherwise.
44	(c) Limit the duration of To have the audit period limited
45	to 24 months after the date a claim is submitted to or
46	adjudicated by the entity.
47	(d) <u>In the case of</u> To have an audit that requires clinical
48	or professional judgment, conduct the audit in consultation
49	with, or allow the audit to be conducted by, or in consultation
50	with a pharmacist.
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51 Allow the pharmacy to use the written and verifiable (e) 52 records of a hospital, physician, or other authorized 53 practitioner, which are transmitted by any means of communication, to validate the pharmacy records in accordance 54 55 with state and federal law. 56 (f) Reimburse the pharmacy To be reimbursed for a claim 57 that was retroactively denied for a clerical error, typographical error, scrivener's error, or computer error if the 58 59 prescription was properly and correctly dispensed, unless a pattern of such errors exists, fraudulent billing is alleged, or 60 the error results in actual financial loss to the entity. 61 Provide the pharmacy with a copy of To receive the 62 (q) preliminary audit report within 120 days after the conclusion of 63 64 the audit. 65 Allow the pharmacy to produce documentation to address (h) 66 a discrepancy or audit finding within 10 business days after the preliminary audit report is delivered to the pharmacy. 67 68 (i) Provide the pharmacy with a copy of To receive the 69 final audit report within 6 months after the pharmacy's receipt 70 of receiving the preliminary audit report. 71 (j) Calculate any To have recoupment or penalties based on 72 actual overpayments and not according to the accounting practice 73 of extrapolation. 74 (2) The rights contained in This section does do not apply 75 to:

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(a) Audits in which suspected fraudulent activity or other intentional or willful misrepresentation is evidenced by a physical review, review of claims data or statements, or other investigative methods;

80 (b) Audits of claims paid for by federally funded81 programs; or

82 (c) Concurrent reviews or desk audits that occur within 3
83 business days <u>after</u> of transmission of a claim and where no
84 chargeback or recoupment is demanded.

(3) An entity that audits a pharmacy located within a Health Care Fraud Prevention and Enforcement Action Team (HEAT) Task Force area designated by the United States Department of Health and Human Services and the United States Department of Justice may dispense with the notice requirements of paragraph (1) (a) if such pharmacy has been a member of a credentialed provider network for less than 12 months.

92 (4) Pursuant to s. 408.7057, and after receipt of the 93 final audit report issued under paragraph (1)(i), a pharmacy may 94 appeal the findings of the final audit report as to whether a 95 claim payment is due and as to the amount of a claim payment. 96 (5) A health insurer or health maintenance organization 97 that, under terms of a contract, transfers to a pharmacy benefit 98 manager the obligation to pay a pharmacy licensed under chapter 99 465 for any pharmacy benefit claims arising from services provided to or for the benefit of an insured or subscriber 100

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101	remains responsible for a violation of this section.
102	Section 2. Subsection (6) of section 624.490, Florida
103	Statutes, is renumbered as subsection (7), and a new subsection
104	(6) is added to that section, to read:
105	624.490 Registration of pharmacy benefit managers
106	(6) A person who fails to register with the office while
107	operating as a pharmacy benefit manager is subject to a fine of
108	\$10,000 for each violation.
109	Section 3. This act shall take effect July 1, 2022.

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