

Pharmacy Provider Audits

To: All Pharmacy Providers Participating in the Nebraska Medicaid Program

From: Unified Program Integrity Coordinator – Mid West (UPIC – MW)

Contractors have completed audits on pharmacies to review the compliance with Nebraska Medicaid regulations related to the dispensing and documentation of prescriptions reimbursed through the managed care organization (MCO) pharmacy benefit managers (PBMs). The audits have found that providers are not consistently complying with these regulations and directions from the MCO PBM. This document lists some of the frequently occurring errors and includes tips to avoid non-compliance and errors in the future.

- Pharmacies are not providing complete and accurate prescription documentation when requested (e.g., prescription labels, signature logs, refill histories).
- Pharmacies are not documenting consultations with prescribers when changes to hard copy prescriptions are necessary.
- Pharmacies are not entering prescription details correctly (e.g., prescribing doctor, day supply, prescription refills authorized).
- Pharmacies are processing prescriptions that are missing required information (e.g., doctor's name, prescriber's, or patient's address).

To avoid problems, pharmacies should do the following:

1. Review regulations related to the dispensing of medications reimbursed by Nebraska Medicaid. These can be found here:
 - a. Nebraska Administrative Code, Title 471 Nebraska Medicaid Program Services, Chapter 16; available at [Nebraska Rules and Regulations](#)
 - b. Nebraska Revised Statutes, Chapter 28 Crimes and Punishments; available at [Nebraska Legislature - Revised Statutes Chapter 28](#)
 - c. Nebraska Revised Statutes, Chapter 38 Health Occupations and Professions; available at [Nebraska Legislature - Revised Statutes Chapter 38](#)
 - d. Nebraska Revised Statutes, Chapter 71 Public Health and Welfare; available at [Nebraska Legislature - Revised Statutes Chapter 71](#)
2. Review Nebraska Medicaid Pharmacy Policy and be familiar with the expectations and contracts of Pharmacy Benefit Managers (PBMs). Nebraska Administrative Code, Title 482 Nebraska Medicaid Managed Care; available at [Nebraska Rules and Regulations](#)
3. Establish and follow a quality control protocol to verify current regulations are being followed appropriately.
4. Document everything, especially any communications with other healthcare providers or insurance providers that result in changes to prescription details.
5. Promptly respond to all requests from contractors and the MCOs. Supply information and documentation to substantiate the prescription paid for with Medicaid dollars.
6. Complete regular quality checks to ensure the necessary information is documented.