

MEMO

To: Network Pharmacy
From: Elixir Pharmacy Audit and FWA Team
Date: Wednesday, April 15, 2020



The Pharmacy Audit Whisperer – Maintaining Rx Compliance During a Pandemic

During this national emergency, many pharmacies are faced with increased workloads, staff shortages due to sickness or childcare challenges, and high call volume from patients' seeking early fills of their medication or guidance about the pandemic. Unfortunately, the relaxation of signature requirements by CMS and several Boards of Pharmacy, lifting of refill-too-soon, and relaxation of edits to ensure patient's access to medications during the crisis also increases the potential for fraud, waste and abuse (FWA).

The purpose of this communication is to share:

- certain actions taken by Elixir to support pharmacies during the pandemic
- best practices to avoid FWA-related scrutiny.

Actions taken regarding routine pharmacy audits:

- All scheduled onsite audits have been cancelled or postponed as of March 16, 2020.
- Audits requests have not been initiated over the past weeks, and will remain on hold as the situation develops.
- Audits that were in progress prior to national emergency declaration:
 - Initial audit results that have discrepancies suitable for appeal have been paused since the first week of March
 - Communications on outcomes of appeal reviews have been paused since the first week of March. Decision letters will resume this week

No change has been made to investigations done by our Special Investigations Unit (SIU).

Best practices to avoid FWA-related scrutiny:

- **Utilize the Service Code Override 13 only when the patient has indicated they are asking for refills due to the COVID-19 crisis**, documenting such in the prescription hard copy or pharmacy system. You may need to check your pharmacy software to ensure the code doesn't remain programmed for future fills in an automatic manner.
- **Establish a pandemic/ emergency status policy, if one is not available.** To avoid wasteful dispensing and drug diversion, the pharmacy may want to establish a limit for second or third early fills, depending on the time between fills and the days' supply for each. For example, a second early fill of a 90 days' supply of medication in less than 2-3 weeks' time would have to be reviewed by management and properly documented if justified. Due to high unemployment rates, drugs that ordinarily do not have black market value or abuse potential may become targets for diversion due to loss of healthcare benefits by individuals.
- **Continue to follow your State Board of Pharmacy guidance** regarding signature log requirements, chloroquine/ hydroxychloroquine dispensing, prescription authority during pandemic and so on.
- **Remind your Medicare members** that an excessive quantity of early fills may bring them closer to the coverage gap and potentially increase their copays once the crisis is over, or even before. Similar scenario may apply to non-Medicare patients depending on their benefit design.

Aberrant billing and other FWA-related behaviors will continue to result in pharmacy investigations and other corrective actions such as chargebacks, suspensions, and terminations. **SIU has been contacting patients at random to validate request and receipt of billed medications.** All submitted claims must be for medications with a valid patient request and need in order to ensure patient access to treatment. If you have any questions regarding this communication, please contact Pharmacyaudits@elixirsolutions.com.

Thank you,
Elixir