

Pharmacy Appeals

FREQUENTLY ASKED QUESTIONS

CLAIM ADJUSTMENT PROCESS

When does Prime adjust claims?

Prime adjusts claims when data and/or financial errors are identified on a claim during a pharmacy audit or investigation. Claim adjustments are also made when a pharmacy does not comply with claim review requests for documentation or claim correction.

How will the claims be adjusted?

Once the audit report is final or claim review process is complete, Prime will adjust claims on behalf of the pharmacy.

Can I reverse and resubmit historical claims at the pharmacy?

No. Prime manages the claim adjustments, unless otherwise required by law. This is necessary to document the reason for the adjustment.

How will I be informed of the final claim adjustments?

Prime issues a report to the pharmacy and/or corporate office after claims have been adjusted.

Why can't I find a corresponding record on my remittance advice?

The transactions associated with the claim adjustments appear on the pharmacy remittance in most, but not all, circumstances. Pharmacies should reference the Claim Adjustment Audit Report for complete information regarding claims that have been adjusted.

Why am I seeing a claim with \$0 or a penny reimbursement on my remit?

The adjusted claim will be submitted with no costs when the dispensing event happened, but the event was in error and should not have been dispensed. A penny reimbursement is used in limited situations where downstream systems cannot recognize a claim with no costs.

What types of claim adjustments does Prime perform and how do I identify them?

Prime adjusts claims where there are administrative, financial, and coverage errors identified. Based on the audit or investigation findings, a claim is either reversed or reversed and resubmitted. Below are some examples of common reasons for claim adjustments:

- The pharmacy submitted an incorrect Prescriber ID. The claim is reversed and resubmitted with the correct Prescriber ID.
- The pharmacy submitted 100 tablets as a 90 day supply, directions are 'take 1 tablet daily' and the patient's maximum benefit is 90 days. The claim is reversed and resubmitted with a quantity of 90 tablets as a 90 day supply.
- The pharmacy submits a prescription refill without authorization for additional refills. The claim is reversed and resubmitted as \$0.00.

PHARMACY FINANCIAL IMPACT

Do I still need to pay the identified recoveries?

In most cases, the associated pharmacy payment adjustments occur through the remittance advice.

Can I submit payment for the errors instead of having Prime adjust the claims?

No, unless otherwise allowed by law. In limited circumstances, Prime may request that the pharmacy submit payment to Prime after the claim adjustment has been made.

What if the reimbursement price changes upon re-adjudication of the claim(s)?

The drug cost applicable for the fill date will be maintained. The plan paid and member cost share may change based on the specific audit finding and adjustment needed.

COVERED PERSON REFUNDS

What do I do if the Covered Person is owed a refund?

Pharmacies are informed of the overall change in the Covered Person's cost share after the claims have been adjusted. Pharmacies are expected to refund any amounts owed to the Covered Person and retain supporting documentation.

Can I request reimbursement from the Covered Person if there is a change in Covered Person's cost share?

No, reimbursement cannot be requested from the Covered Person. It is the pharmacy's responsibility to submit claims correctly at the time of dispensing.

PRESCRIPTIONS WITH REFILLS REMAINING

How should I manage prescription orders that have refills remaining?

Pharmacies are expected to ensure that future fills related to audited claims are submitted correctly. This will avoid additional future audits and recoveries.