

Duplicative and Excessive Pharmacy Billing in Wisconsin

What Is Duplicate Billing

Duplicate billing refers to the following situations:

- The pharmacy provider submitted and received payment for the same service to the same Medicaid recipient more than one time.
- More than one pharmacy provider was billed for the same service.

Examples Include:

- A pharmacy billed and received payment for a 24-day supply of Remodulin on October 26, 2017.
 The pharmacy also billed and received payment for a 20-day supply on October 30, 2017.
- Pharmacy A billed and received payment for a 24-day supply of Remodulin on October 26, 2017.
 Pharmacy B also billed and received payment for a 24-day supply of Remodulin on October 26, 2017.

What Are Excessive Quantities?

Excessive quantities refers to the following situations:

- The 34-day supply limit was exceeded.
- The prescription was refilled before 80% of the previous claim's days' supply for the same drug, drug strength, and dosage form was taken.
- The quantity billed by the pharmacy provider is greater than expected quantity based on the package size.

Examples Include:

- A pharmacy billed and was paid for dispensing a 90-day supply of Flovent when only a 34-day supply is allowed.
- A pharmacy billed and was paid for dispensing a 34-days supply of Lisinopril on day 17 of the previous claim for a 34-day supply of Lisinopril. At this point, the member had used only 50% of the previous claim's day supply and did not provide a valid reason for filling the prescription early.
- A pharmacy billed and was paid for dispensing 14 kits of Betaseron, which is the number of vials in the kit. The pharmacy should have only billed for one.

What Is a Drug Utilization Review (DUR) Overuse Precaution Alert?

Pharmacies receive an overuse precaution DUR alert when a member is requesting a refill before 80% of the previous claim's days' supply for the same drug, drug strength, and dosage form has been taken. Pharmacies receive an alert indicating the number of days that should remain on the prescription, not the day that the drug can be refilled without activating the alert. Providers do not receive an alert for drugs for a 10-day supply or less.

Since 2017, the Office of the Inspector General (OIG) has recovered over \$1,000,000 in overpayments for comprehensive pharmacy audits. The majority of findings in these audits are for claims considered duplicative or excessive.

What Are the Documentation Requirements?

Pharmacy providers must state the actual quantity dispensed and the correct days' supply on claims for legend drugs.

OIG addresses duplicative and excessive billing through pharmacy audits. Possible audit outcomes include, but are not limited to, technical assistance, recoupment, sanctions, and termination.

