

## Pharmacy Audit Recovery Guidelines

Not applicable to Part D claims. Please see Part D Pharmacy Audit Guidelines

Code	Error Type	Message on Audit Report	Additional Description	Recovery Amount	Appeal Documentation
1/1E	DAW 1	<p>DAW 1 Error – The prescription order does not indicate the prescriber ordered brand name.</p> <p>Or</p> <p>DAW 1 Error- DAW 1 is not necessary for single source brand name medications. DAW 0 is the appropriate code to use.</p> <p>Or</p> <p>DAW 1 Error- DAW 1 is not necessary for generic medications. DAW 0 is the appropriate code to use</p>	Pharmacy dispensed a multi-source brand name medication with a DAW code of 1 when the prescription order does not indicate the prescriber ordered brand name only.	Difference based on the most expensive generic available (based on 90 or 100 count or larger package sizes). Use MAC lists when applicable.	<p>Pharmacy may provide copies of original medical records supporting prescriber’s order for brand name.</p> <p>Prescriber attestations accepted for commercial claims only.</p>
2 /2E	DAW 2	DAW 2 Not Documented – The documentation does not specify the patient’s request for brand.	Pharmacy dispensed a multi-source brand name medication with a DAW code of 2 when the documentation does not indicate the patient requested brand name only.	Not applicable	Pharmacy may provide copies of original pharmacy documentation indicating patient’s request for brand name. Computer system notes must be time and date stamped from the

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					time of dispensing.  Patient attestations accepted for commercial claims only.
8 /8E	DAW 8	DAW 8 Error – DAW 8 is only to be used in situations where the generic is not available in the marketplace. DAW 0 is the appropriate code to use.	Pharmacy dispensed a multi-source brand name medication with a DAW code of 8 and did not provide documentation supporting that generic was unavailable from the manufacturer at the time of dispensing.  Note: Pharmacy will receive education and may be put on a corrective action plan if a trend is identified.	Not applicable	Pharmacy may provide documentation from wholesaler confirming generic was not available at the time of dispensing.
B	Unit of Measure ( i.e. billed by syringe vs mls)	Billing Error – Quantity submitted in the wrong unit of measure. DRUG NAME is to be billed per <ML,KIT>. Correct quantity for this claim is XX.	The pharmacy submitted an incorrect metric quantity for this package, resulting in an overpayment.	Difference	N/A
BG	Brand Billed/ Generic Dispensed	Brand Drug Billed, Pharmacy Dispensed Generic – Pharmacy submitted the NDC for	Pharmacy system documentation indicates a generic was dispensed; however pharmacy billed the brand.	Difference	Pharmacy may submit original documentation that confirms brand was dispensed along with

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		DRUG A. However, Prescription label states DRUG B was dispensed.			explanation for variance between what was provided for the audit and what pharmacy system documents as dispensed.
CN	Incorrect NDC(s) billed on compound claim	Incorrect NDC submitted for XYZ Drug- Pharmacy documentation shows that NDC X was dispensed however the pharmacy submitted NDC Y.	Ensure NDC used in compound is a covered NDC.	Overpayment	Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.  Prescriber attestations accepted for commercial claims only.
CNC	Non-compound Flagged as Compound	Billing Error – This medication is not a compound, however the pharmacy flagged this claim as a compound when processing the claim.	A non-compound claim was incorrectly flagged as a compound when submitted, resulting in higher payment.	Difference	Pharmacy may appeal with original documentation supporting drug was compounded.
CNE	Incorrect NDC(s) billed on compound claim	Incorrect NDC submitted for XYZ drug- Pharmacy documentation shows that NDC X was dispensed however the pharmacy submitted NDC Y.	Ensure NDC used in compound is a covered NDC.	Not applicable	Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.

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					Prescriber attestations accepted for commercial claims only.
CNF	Compound Not Flagged as Compound	Compound Billing Error – The pharmacy did not flag this claim as a compound when processing the claim.	A compound claim was not flagged as a compound resulting in higher payment.	Difference	Pharmacy may appeal with original documentation supporting drug was not compounded.
COP	Overpriced Compound	Compounding Pricing Error – Based on the AWP of the ingredients and quantities used, \$XX is the reimbursable amount per the Prime Provider Manual.  Please note: This claim processed under single ingredient processing platform.	For claims processed under single-ingredient platform (prior to D.0).  The amount billed by the pharmacy exceeds the contracted rate. Prime reimburses compound claims based on the AWP of the product and the quantity used to prepare the compound. Charges for labor and equipment are not reimbursable.	Difference	Contracted pricing may not be appealed through the pharmacy audit process.  Pharmacy may appeal with supporting documentation if it is believed compound pricing calculated incorrectly.
CPD/C PDR	Ineligible Part D Ingredient in Compound	Part D does not cover inhalation or infusion pump products dispensed for home use. Please reverse claim.  ----- Part D does not cover XX	Compound does not meet Part D criteria of an eligible drug.	Difference	Pharmacy may appeal with supporting documentation indicating drug is covered under Part D.

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		<p>component of this compounded product.</p> <p>Please note: This claim processed under single ingredient processing platform.</p> <p>-----</p> <p>No active ingredients are Part D eligible.</p> <p>Please note: This claim processed under single ingredient processing platform.</p>			
CQ	Compound Quantity Incorrect	Pharmacy submitted the incorrect quantity for NDC X. According to the documentation received, the appropriate quantity to submit for this NDC/product is Xgm.		Overpayment	<p>Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.</p> <p>Prescriber attestations accepted for commercial claims only.</p>
CQE	Compound Quantity Incorrect	Pharmacy submitted the incorrect quantity for NDC X. According to the		Not applicable	Pharmacy may provide copies of original medical records that support the

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		documentation received, the appropriate quantity to submit for this NDC/product is Xgm.			variance from the pharmacy's prescription order documentation.  Prescriber attestations accepted for commercial claims only.
DPA	Invalid Override Code	Invalid Override Code – Prescription documentation does not support override code submitted by pharmacy. Prescription documentation does not indicate <INSERT REQUIREMENT>.	The pharmacy overrode a claim without the documentation supporting the reason for override.	Full	Pharmacy may provide original medical records supporting reason for override.
DSE	Invalid Day Supply	Invalid Valid Day Supply-Prescription Order Reads: <fill in SIG>. A quantity of XX is an appropriate amount to dispense as a XX day supply.		Not applicable	Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.  Prescriber attestations accepted for commercial claims only.
CMI	Compound ingredients	The pharmacy submitted the compound without all		Overpayment	Pharmacy may provide copies of original medical

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	missing from claim submission	ingredients used. Clarification code 08 should be used to accept payment for eligible ingredients as applicable.			records that support the variance from the pharmacy's prescription order documentation.  Prescriber attestations accepted for commercial claims only.
CMIE	Not including all ingredients used in compound.	The pharmacy submitted the compound without all ingredients used. Please submit all ingredients using the 08 clarification code.		Not applicable	Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.  Prescriber attestations accepted for commercial claims only.
CPR	Compound Priced Below Plan Threshold	The pharmacy has submitted this claim or series of claims incorrectly. If submitted correctly, this claim or series of claims would have rejected and required prior authorization review.		Full	

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EF	Early Initial Fills	Prescription was filled prior to prescription order written by the practitioner. The prescription is dated X date and pharmacy filled on X date.	Not applicable for legend drugs in states that do not require the issue date be recorded on the prescription order.	Full	Pharmacy may provide copies of original medical records or date and time stamped pharmacy computer system records, from the time of dispensing, indicating prescriber authorization.  Prescriber attestations accepted for commercial claims only.
ER	Expired Order	Filled after Rx Expired – The prescription was issued on X date, and would have expired on X date.	Not applicable for legend drugs in states that do not require the issue date be recorded on the prescription order.	Full	Pharmacy may provide copies of original medical records or date and time stamped pharmacy computer system records, from the time of dispensing, indicating prescriber authorization.  Prescriber attestations accepted for commercial claims only.
HC	No Prescription Order Provided	Missing Prescription Order - Pharmacy did not provide the prescription	The pharmacy did not provide a copy of the prescription order as requested during the audit	Full	Pharmacy may provide copies of original medical records supporting

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		order.	process.		prescription.  Prescriber attestations accepted for commercial claims only.
INN	Invoice Shortage -- NDC not purchased	Purchasing invoices provided do not support that the pharmacy purchased this NDC.		Full	Pharmacy may submit copies of original invoice documentation.
INP	Invoice Shortage -- Insufficient Quantity Purchased	Purchasing invoices provided do not support the quantity billed.		Amount of shortage	Pharmacy may submit copies of original invoice documentation.
ISE	Use as Directed - Insulin and Diabetic Supplies	"Use as directed" is not accepted without specific daily dose documented on the prescription order prior to dispensing. For sliding scale dosing, maximum daily dose can be obtained.	Specific directions are needed to support dispensing of insulin and diabetic supplies. If specific directions are not present on the prescription, Prime will provide the pharmacy an opportunity to obtain copies of original medical records supporting directions. Prime will review original medical records to validate the quantity and day supply billed.  If sliding scale, pharmacy may obtain the maximum dose per day	Not applicable	Pharmacy may provide copies of the original medical record with daily dosage.  Prescriber attestations accepted for commercial claims only.

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			and calculate the dosage using the maximum.  Please note that specific directions are not required when the prescription indicates "Use as directed in insulin pump."		
LC	Wrong Location Code	Incorrect Location Code – The pharmacy incorrectly entered a LTC location code when submitting the claim.	The pharmacy billed a LTC location code, but the prescription was dispensed as a retail prescription to a member who does not reside in a Long Term Care Facility.	Difference in dispensing fee amount	Pharmacy may provide original documentation confirming location of patient at the time of dispensing.
LOC	Pharmacy cannot be located	Pharmacy could not be located on the date of the onsite audit.		Full	Pharmacy must comply with an onsite audit.
LUDE	Prescriber Gives Directions, Pharmacy Labels Use as Directed	Pharmacy did not label the prescription with the prescriber's directions for use. The prescription order reads <SIG>, and pharmacy labeled the prescription with "Use as Directed."	Prescription order indicates specific directions. The pharmacy did not label the prescription bottle with the prescriber's directions, instead labeling with "Use as directed."  Does not apply to situations where directions are too long to accurately fit on label and instructions have been provided to the patient by an alternate	Not applicable	Pharmacy may appeal recovery by submitting patient AND prescriber statements confirming patient was not harmed by incorrect directions.

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			means.  Does not apply to pre-packaged items that include directions for use.  Note: Pharmacy will receive education on first audit and may be put on a corrective action plan if a trend.		
M	Multiple Errors	As applicable based on errors noted.			
MBRR	Billed Under Wrong Covered Person	Claim billed under incorrect Member ID – The prescription is written for <name>. Claim is billed under Member ID for <covered person>. Please reverse this claim.	The claim was submitted to the wrong member’s ID number.	Pharmacy will be instructed to reverse out claim and reprocess to the correct member’s ID.	Pharmacy may provide original documentation confirming identify of patient matches member information.
MD	Missing Documentation: Prescription label, compound log, or wholesaler invoices	Missing Documentation – Pharmacy did not provide the following requested documentation: <prescription label or data entry screen shot> <compound log> <supporting wholesaler invoice(s)><other>		Full	Pharmacy may provide original pharmacy documentation with appeal.

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MDAR	Part A v Part D	Claim ineligible for Medicare Part D due to qualified Part A stay in long term care facility. Please reverse claim.	The pharmacy billed a claim to Part D when the member resided in a Long Term Care Facility under a qualified Part A stay.	Full	Pharmacy may provide original Long Term Care Facility patient records which indicate Medicare Part A eligibility period(s).
MDBR	Part B v Part D	Claim ineligible for Medicare Part D. Please reverse claim.	The claim is not eligible for Part D due to eligibility for this prescription as a Part B covered benefit.	Full	Pharmacy may provide original medical records supporting reason for Part D coverage.
MI	Missing Required Information	Missing Prescription Element(s) – The prescription lacks the following required element(s): XXXX. Please see prescription requirements on page 24 & 25 of the Prime Provider Manual.	<p>The prescription order is missing one or more of the following required elements:</p> <ul style="list-style-type: none"> <li>Patient Name</li> <li>Date of Order*</li> <li>Prescriber Name</li> <li>Drug Name/Strength</li> <li>Quantity</li> </ul> <p>Quantity is not required on Long Term Care Facility medication orders except as required by the DEA for controlled substances.</p> <p>*Not applicable for legend drugs in states that do not require date of order.</p>	Full	<p>Pharmacy may provide copies of original medical records that contain the missing information.</p> <p>Prescriber attestations accepted for commercial claims only.</p>

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NDC	NDC dispensed different than NDC on claim	Incorrect NDC Submitted – The claim was billed with NDC A. Pharmacy documentation shows that NDC B was dispensed.	Pharmacy system documentation indicates a different NDC was dispensed than was billed.	Difference	Pharmacy may submit original documentation that confirms billed NDC was dispensed along with explanation for variance between what was provided for the audit and what pharmacy system documents as dispensed.
OCE	Invalid Origin Code (Med D)	Invalid Origin Code – Prescription order is a <type> prescription. Pharmacy submitted the incorrect origin code of XX, indicating a <type> prescription.	The origin code billed by the pharmacy does not match the prescription documentation.  Note: Pharmacy will receive education on first audit and may be put on a corrective action plan if a trend.	Not applicable	Pharmacy may provide copies of original medical records confirming method of prescription communication.
OD	Quantity over-dispensed	Quantity Over-dispensed – Prescription reads: <fill in SIG>. A quantity of XX is an appropriate amount to dispense as <appropriate day supply>.	The quantity dispensed by the pharmacy exceeds the benefit plan amount.  Example: Pharmacy dispenses 45 tablets for a 30 day supply; directions are to “take 1 tablet daily”. Benefit plan covers a maximum day supply of 30 days. Recovery equal to the amount paid for 15 tablets, the amount	Extra amount billed to benefit plan	Pharmacy may provide copies of original medical records that support the variance from the pharmacy’s prescription order documentation.  Prescriber attestations accepted for commercial claims only.

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			billed in excess of the member's benefit.		
ODR	Quantity Over-dispensed -- Early Refill	Quantity Over-dispensed – Previous day supply error on DATE claim allowed this claim to pay earlier than the benefit allows. A quantity of XX was dispensed on DATE and would last X DAYS.	<p>Day supply error on previous fill of this prescription caused this refill to process earlier than allowed by the benefit plan.</p> <p>Example: Pharmacy bills fill #1 with an incorrect day supply of 30 instead of 90.</p> <p>Fill #2 is billed after 32 more days. If fill #1 had been billed correctly with the 90 day supply, this fill would reject for “refill too soon.”</p>	Costs related to medication from date of early dispensing to the date the claim eligible for refill	<p>Pharmacy may provide copies of original medical records that support the variance from the pharmacy's prescription order documentation.</p> <p>Prescriber attestations accepted for commercial claims only.</p>
PA	Pharmacist Absent	Pharmacist was not present when claim was submitted.		Full recovery of claims submitted when pharmacist was not present	N/A
PD	No Proof of Delivery	The pharmacy did not present documented proof of delivery confirming receipt of the prescription drug.	Acceptable proof of delivery includes signature logs, delivery logs, or computerized transaction logs.	Full	<p>Pharmacy may provide original pharmacy or long term care facility documentation with appeal.</p> <p>Patient attestations accepted for commercial</p>

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PDOD	Prescriber Deceased	Prescription related to deceased prescriber and filled outside of allowed federal or state guidelines		Full	Pharmacy may provide documentation supporting that the prescriber is not deceased.
PED	Pedigree documentation provided does not support the quantity billed.	Pedigree documentation provided does not support the quantity billed.		Amount of shortage	Pharmacy may submit copies of pedigree documentation.
PER	Pharmacist Excluded/ Sanctioned	Claim ineligible for Medicare Part D due to pharmacist excluded or sanctioned by Medicare. Please reverse this claim.		Full	Pharmacy may provide documentation supporting the exclusion or sanction was not in place at the time of service.
PIE	Prescriber ID	Invalid Prescriber ID – Prescription is written by DR. X. Pharmacy billed with the incorrect Prescriber ID of XXX, belonging to NAME.	The claim was billed with an incorrect or dummy Prescriber ID.	Not applicable	Pharmacy may provide documentation from prescriber confirming that the Prescriber ID number billed by the pharmacy is correct.
PR	Priced Below Plan Threshold	The pharmacy has submitted this claim or series of claims incorrectly. If submitted correctly, this claim or series of claims would		Full	

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		have rejected and required prior authorization review.			
PS	Prescription Splitting	Prescription Splitting – Pharmacy billed partial quantities multiple times in one month. Pharmacy can only bill once per month for maintenance medication.	The pharmacy billed partial quantities in one month instead of billing a one month supply, resulting in excess dispensing fees.	Dispensing Fee	Pharmacy may provide original medical records supporting reason for smaller quantity.
RX	Preprinted prescription order forms use to order prescription.	Invalid prescription documentation – Pharmacy dispensed medication where preprinted order form was used to order the prescription.	*Not applicable where states allow pre-printed order forms or are silent on requirement.	Full	N/A
SIGE	Wrong Directions to Patient	Incorrect directions given to patient. Prescription order reads <SIG>. Pharmacy labeled prescription with the incorrect directions of <SIG>. Pharmacy should follow up with patient and prescriber regarding this error.	Pharmacy labeled the prescription bottle with the incorrect directions for use.	Not applicable	Pharmacy may appeal recovery by submitting patient AND prescriber statements confirming patient was not harmed by incorrect directions.

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SPD	No Active State License	At the time of dispensing, the pharmacy shipped to a state where they were not appropriately licensed.		Overpayment	Pharmacy may provide a BoP State License to indicate they were licensed in the state at the time of dispensing.
UD	Use as Directed – Other than Insulin and Diabetic Supplies  See Code ISE for Insulin and Diabetic Supply Guidelines	“Use as directed” is not accepted without the specific daily dose documented on the prescription order at the time of fill.	Please note that specific directions will not be required on the following drugs due to the nature of dosing:  Coumadin/warfarin Oral prednisone Pre-packaged items with specific directions for use on the package (ex: Z-pak 6 for 5 days) One time treatments (lice, scabies, etc) Injectables to be injected at clinic (Myobloc, Gardisil, Zostivax etc) Hemophilia Injections Fertility Injections As needed emergency medications (Epi pens, Diastat, Nitroglycerin, etc) Migraine meds within manufacturer guidelines Topicals (standard quantities) Erectile dysfunction medications	Not applicable	Pharmacy may provide copies of original medical records that support daily dosage.  OR  Pharmacy may provide drug information.  OR  Prescriber statement indicating that a specific dosage cannot be provided because dispensing varies based on changing lab results. (This does not apply to insulin, as a maximum daily dose is generally set.)

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UP	Prescriber denies prescribing	Prescriber denies prescribing this medication for this patient.	Prime contacted the prescriber to verify the prescription and the prescriber denies prescription this medication for the patient.	Full	Pharmacy may provide copies of original medical records.
UR	Unauthorized Refills	Unauthorized Refill – The original prescription order states QTY with X refills. This dispensing exceeds the prescription order. Prescription previously filled on the following date(s): XXX.	The pharmacy refilled the prescription more times than the original prescription order allowed.	Full	Pharmacy may provide copies of original medical records or date and time stamped pharmacy computer system records, from the time of dispensing, indicating prescriber authorization.  Prescriber attestations accepted for commercial claims only.
URP	Unauthorized Refills (Partial)	Quantity Dispensed Exceeds Prescription Order – The original prescription states QTY with X refills. After previous fills: This dispensing exceeds the amount remaining on the prescription order by	The total quantity dispensed over the course of dispensing this prescription exceeds the total quantity authorized by the original prescription order.	Excess amount	Pharmacy may provide copies of original medical records or date and time stamped pharmacy computer system records, from the time of dispensing, indicating prescriber authorization.

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		XXQTY.			Prescriber attestations accepted for commercial claims only.
VR	Outside Scope of Practice	Invalid Prescriber ID – The prescriber ID billed belongs to a practitioner not authorized to prescribe medication. The prescriber ID belongs to a <veterinarian> <chiropractor>. Please reverse claim.	The prescription order is written by a practitioner who does not have prescriptive authority to write the prescription in question.	Full	Pharmacy may provide copy of medical license from prescriber confirming valid license to prescribe drug in question.
VAC	Vaccine Administration Fee Not Billed	Underpayment Alert - Pharmacy is entitled to a vaccine administration fee. Please reprocess claim and bill for vaccine administration fee.	Participating pharmacies in the vaccine administration network are entitled to a vaccine administration fee. When it is identified that pharmacy did not bill the fee, pharmacy will be contacted and instructed to reprocess in order to receive the correct reimbursement.	N/A	N/A
WD	Wrong drug dispensed to patient	Incorrect Drug Dispensed – The prescription order is written for DRUG A. The pharmacy dispensed DRUG B to patient.	Pharmacy dispensed the wrong drug to the patient. Review of prescription order and pharmacy system records confirms finding.	Full	Pharmacy may provide copies of original medical records that support the variance from the pharmacy’s prescription order documentation.

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