Guidelines for pharmacy audits of long-term care pharmacy services

When auditing long-term care (LTC) pharmacy services, auditors may need to review multiple pieces of documentation. The following guidelines are designed to assist pharmacies in responding to audits conducted by Humana Pharmacy Solutions Inc. ("Humana") or a third party designated by Humana. The following guidelines are not exhaustive. They supplement the audit discrepancy code list enclosed with the audit letters provided to the pharmacy as part of the audit process, additional policies and procedures available in the pharmacy portal on Humana.com, and the Pharmacy Provider Agreement. In the event that the Pharmacy Provider Agreement and these guidelines are in direct conflict, the terms of the Pharmacy Provider Agreement control. In the event that laws applicable to the LTC pharmacy services being audited and these guidelines are in direct conflict, the applicable law governs.

A. Prescription hard-copy requirements

1. Elements. Prescription hard copies must contain the following elements to be considered acceptable (unless otherwise specified by applicable law):
   a) Patient name
   b) Date of issuance
   c) Name of drug
   d) Strength of drug
   e) Dosage form of drug (if applicable)
   f) Directions for use
   g) Documented duration of therapy (e.g., number of refills, clear start/stop dates or duration written by prescriber)
   h) Prescriber’s Drug Enforcement Agency (DEA) number for controlled substances
   i) Prescriber’s printed name and signature on the original physician order or hard-copy prescription

Examples: The following are examples of prescription hard-copy documentation:
   • The original signed physician order/hard copy within a year of date of service and refill sticker for the date of service requested
   • The original signed physician order/hard copy and the signed physician order for the month requested
   • A prescription drug order, a chart order or a medication administration record (MAR) that clearly contains all nine elements outlined above (Prescriber orders written in progress notes also may be acceptable if the notes contain the nine required elements.)
   • A fax request for refills, as long as it contains all nine elements above and is clearly approved by a prescriber (Note: A refill sticker alone is not an acceptable form of documentation.)
   • Specific prescription discharge orders with a clear duration of therapy
   • A prescriber statement that meets the requirements listed on the audit discrepancy code list

2. Emergency supply of medications. Pharmacies must provide an emergency supply of medication as required by the facility in compliance with state requirements. For emergency supplies of medications or Emergency-kit (E-kit) fills, Humana will accept the following documentation:
• Original physician/chart order with all of the elements of a prescription hard copy listed in A.1; or
• Emergency-kit form/slip for record of administration or delivery of medication, or a comprehensive record of resident’s medication order and drug administration

3. **Controlled substances.** For controlled substances, only an original order, a hard-copy prescription, an electronic prescription or a fax prescription from the prescriber or the prescriber’s agent will be accepted. Controlled substance prescriptions written by an agent **must be accompanied by a written agreement in which authority was properly conferred on the agent to act on behalf of a prescriber regarding controlled substance prescriptions.**

The DEA recognizes a nurse at an LTC facility as an agent of a prescriber if a valid relationship exists for the purpose of communicating controlled substance prescriptions to pharmacies. The DEA emphasizes that, regardless of the setting, only the prescriber can designate an agent to act on his or her behalf; furthermore, that agent is subject to the prescriber’s control.

A controlled substance prescription for a Schedule II that is written for a patient in a LTC facility or for a patient with a medical diagnosis documenting a terminal illness may be filled in partial quantities. It must be recorded on the prescription that the patient is either “terminally ill” or an “LTCF patient.” If a prescription is partially filled and it is not documented that the patient is “terminally ill” or an “LTCF patient,” the prescription will be deemed invalid.

**B. Signature log requirements**

1. **Elements.** Signature logs must contain the following six elements to be considered acceptable (unless otherwise specified by applicable law). Note: This documentation is accepted only in the initial documentation window.

   a) Patient name
   b) Date of service
   c) Prescription number(s)
   d) Facility name
   e) Date of delivery to facility
   f) Signature of individual who accepted delivery at the facility

**Examples:** The following are examples of signature log documentation:

• A signature log or patient receipt with all six elements outlined in B.1
• A delivery manifest with all six elements outlined in B.1
• A copy of a medication administration record (MAR) that shows the prescription was administered, the name and signature initials of the person who administered the medication, and the date and time the medication was given
• A signed and dated facility statement from a nurse or staff member with all six elements outlined in B.1

**C. Cycle-fill requirements**

The Humana Pharmacy Solutions Pharmacy Manual states that pharmacies providing LTC pharmacy services in a short cycle-fill type of system may bill through the point-of-sale system cyclically, as long as the cycle does not interfere with the normal days supply and quantity-limit edits. Such billing may be done at the first of the month or at the end of the month, as long as the time interval between billing cycles is consistent.
Short cycle-fill documentation must include records that list all dispensing events included in the submitted claim. For example, if the claim is submitted for a 28-day supply with a submission clarification code (SCC) that indicates dispensing every 14 days, two delivery documents should be produced during the audit. Additionally, all documentation must support the SCC submitted on the claim.

1. **Elements.** For short cycle-fills, hard-copy prescriptions must meet all the requirements listed in A.1. If such documentation does not include the number of refills or does not contain a stop date, the pharmacy must supply the delivery manifest, a refill request confirmation order, an MAR, progress notes or other documentation that clearly shows the LTC facility received the medication. This documentation must clearly state that the prescriber authorized the patient to continue the medication. It also must show that the LTC facility accepted the medication and did not return it to the pharmacy or, in lieu of that, it must include a copy of a prescription refill authorization form.