

	MEDICAL ASSISTANCE BULLETIN COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE		
	NUMBER: 19-02-08	ISSUE DATE: November 27, 2002	EFFECTIVE DATE: November 27, 2002
SUBJECT: Misrepresentation of Prescriber on the Drug Claim		BY:  Peg J. Dierkers, Ph.D. Deputy Secretary for Medical Assistance Programs	

PURPOSE:

1. To remind pharmacy providers of the requirement to accurately represent the identity of the prescriber, i.e., the prescriber's license number, when submitting Medical Assistance (MA) pharmacy claims.
2. To inform pharmacy providers of the penalties for inaccurate reporting of a prescriber's identity or misuse of the out-of-state license number format.

SCOPE:

This bulletin applies to all pharmacy providers enrolled in the MA Program. This includes providers who submit claims to the fee-for-service program, a managed care organization (MCO), or a subcontracted pharmacy benefit manager (PBM) that participates in *HealthChoices*, the Department's mandatory managed care program.

BACKGROUND:

Misrepresentation of the identity of the prescriber on pharmacy claim submissions is a prohibited act as detailed in 55 Pa Code § 1101.75 (a) (8). During recent reviews of pharmacy providers, the Department identified wide spread non-compliance with accurate reporting of the prescriber license number provided on drug claims.

An accurate prescriber license number is essential for the Department or MCOs to monitor physician prescribing patterns and to conduct meaningful and efficient review activities. In addition, false or incorrect license numbers on pharmacy claim data cause the misdirection of educational interventions necessary to fulfill the federally mandated Retrospective Drug Utilization Review Program.

DISCUSSION:

The accurate license number of the prescribing provider must be reported in the appropriate field of the drug claim format. The Medical Assistance Handbook for Pharmaceutical Services, page V-18, details the appropriate formats for reporting license numbers of prescribers.

It is important to stress that the "actual" prescriber must be reported. It is not acceptable to report a senior partner in a group practice, the attending physician, or the patient's regular physician, if this provider was not the prescriber for the particular prescription being submitted. In addition, it is never appropriate to utilize an out-of-state format (e.g. NY999999X or MD999999X) for a Pennsylvania prescriber.

PROCEDURE:

The following procedures/suggestions have been identified to help pharmacies comply with the requirement to report the accurate prescriber license number:

- Pharmacy personnel should closely review the requirements for reporting the prescriber license number as detailed within this MA Bulletin and the Medical Assistance Handbook for Pharmaceutical Services, page V-18.
- If the license number is not provided on the prescription form, the prescriber is a Pennsylvania provider, and the license number is not otherwise available within the pharmacy, actions must be pursued to obtain the license number prior to billing.
- The Pennsylvania Department of State, Bureau of Professional and Occupational Affairs now has a web site where licenses may be retrieved/verified: <http://licensepa.state.pa.us>. Telephone requests will also be accepted for up to ten (10) license verifications per day per organization. The following Board telephone numbers may be useful to pharmacies:

Board	Telephone Number/Area Code 717
Medical	787-2381
Osteopathic & Podiatry	783-4858
Dentistry	783-7162
Optometry	783-7155

- Quality checks should be performed to assure compliance with the prescriber reporting requirement. Whenever errors are identified, pharmacies must correct the misreported prescriber information by initiating an on-line claim reversal (Reference MA Bulletin 19-01-05, issued September 11, 2001) or by submitting a Drug Claim Adjustment/MA 302A (Reference the Pharmaceutical Services Handbook, page V-31).

DEPARTMENT SANCTIONS:

Failure to report the accurate prescriber license number on a MA claim submission is a prohibited act. Accordingly, the Department will seek restitution of the reimbursed amount, as well as consider precluding the provider from participation in the MA Program.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Department of Public Welfare
 Bureau of Program Integrity, Division of Provider Review
 P.O. Box 2675
 Harrisburg, PA 17105-2675
 (717) 705-6872

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