**Claims Processing**

**Section:** Pharmacy Operations

**Compliance:** URAC Specialty Pharmacy 2.1

**URAC Standards:** PHARM-OP 10

**Policy ID:** 7.4

**Approved by:**

**POLICY**

<insert practice name> electronic claims processing complies with the requirements of the National Council for Prescription Drug Program (NCPDP) standard claims transactions for pharmacy drug claims, eligibility, benefit coordination, and related pharmacy services. <insert practice name> utilizes a drug management system <insert pharmacy operating system>. **[PHARM-OP 10]**

The National Council for Prescription Drug Program (NCPDP) standard transactions are the code set standards under HIPAA for the retail pharmacy environment. As a member of the National Council for Prescription Drug Programs, Inc. (NCPDP), <insert pharmacy operating system> has applied NCPDP standards and guidelines to its business practices. <insert pharmacy operating system> continues to closely monitor both NCPDP and ANSI standards.

<insert pharmacy operating system> allows the ability to send or receive electronic orders in real time with HL7 interfaces and electronically process the claims through the system.

**PROCEDURE**

<insert practice name> utilizes the <insert pharmacy operating system> pharmacy program for electronic Rx claims.

<insert pharmacy operating system> offers the safety of electronic prescriptions through an NCPDP SCRIPT-based interface with e-prescribe systems from SureScripts, MedAvant (formerly ProxyMed), Emdeon (formerly WebMD) and RxNT. **[PHARM-OP 10]**

* <insert pharmacy operating system>:Processing claims quickly and easily
* Verification of third party identifying patient by DOB, and zip code.
* Verification of Medicare eligibility
* Troubleshoot/Retransmit of claims with missing or invalid information
* Automatically updating drug cost during claims transmission
* Taking advantage of pre-and post-editing services
* Grouping claims for billing at any time during the month.

<insert practice name> requires that primary patient demographics and a valid prescription verified by the Pharmacist are obtained and processed in the patient record prior to processing electronic claims

These criteria include:

* Patient name, address, contact information
* Patient Date of Birth (DOB)
* Verification of patient as an adult able to complete request or require identification of adult caregiver or guardian
* Any special caregiver information and contact information
* Prescriber name, address, DEA#, NPI#, contact information for verification of preexisting patient/prescriber relationship for new prescriptions
* Verification of patient eligibility information including insurance and payment information.
* Note: Patients without insurance information will be contacted for further payment information verification.
* Any pertinent patient health history including medication history, allergies and past sensitivities

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