

173-71-08

Claims.

- (A) For each drug dispensed under the best Rx program, the participating pharmacy or the drug mail-order system shall submit a claim to ODA not later than thirty days after the drug is dispensed by using the designated, on-line, point-of-sale system.
- (B) ODA shall inform the participating pharmacy or the drug mail-order system submitting the claim of the best Rx price as determined in accordance with rules 173-71-07 to 173-71-07.3 of the Administrative Code.
- (C) Each claim shall specify all of the following:
- (1) The prescription number of the participant's prescription under which the drug was dispensed to the participant;
 - (2) The name and NDC of the drug dispensed to the participant;
 - (3) The number of units of the drug dispensed to the participant;
 - (4) The amount the participant was charged for the drug, including the administrative fee and any professional fee;
 - (5) The date the drug was dispensed to the participant;
 - (6) The best Rx identification number of the participant;
 - (7) The best Rx identification number of the participating pharmacy;
 - (8) The usual and customary charge of the participating pharmacy for the drug dispensed to the participant; and,
 - (9) Any other information determined necessary by ODA to make a determination on a claim in an accurate and timely manner.
- (D) Subject to section 173.803 of the Revised Code, ODA shall make a payment under the best Rx program for each complete and timely claim submitted under section 173.80 of the Revised Code for a drug included in the program that is also included in a manufacturer agreement. ODA shall make the payment for a complete and timely claim by a date that is not later than two weeks after ODA receives the claim from the participating pharmacy or the drug mail-order system.
- (E) Subject to paragraph (G) of this rule, ODA shall make a determination on the amount

to pay for a claim by performing the following duties:

- (1) ODA shall compute the manufacturer payment amount that applies to the transaction, based on quantity of the drug dispensed and the drug's NDC, in accordance with the provisions of division ~~(B)~~ (A) of section 173.812 of the Revised Code; and,
 - (2) ODA shall subtract from the amount computed under paragraph ~~(D)~~(1) ~~(E)~~(1) of this rule the administrative fee amount specified in rule 173-71-07.2 of the Administrative Code.
- (F) ODA may combine the claims submitted by a participating pharmacy or the drug mail-order system to make aggregate payments to the participating pharmacy or the drug mail-order system, in accordance with division (C) of section 173.801 of the Revised Code.
- (G) If the total of the amounts computed under paragraph (E) of this rule for any period for which payments are due is a negative number, the participating pharmacy or the drug mail-order system that submitted the claims has been overpaid for the claims. When there is an overpayment, ODA shall take one of the following options:
- (1) ODA shall reduce future payments made under section 173.831 of the Revised Code to the participating pharmacy or the drug mail-order system; or,
 - (2) ODA shall collect an amount from the participating pharmacy or drug mail-order system that is sufficient to reimburse ODA for the overpayment.
- (H) Any manufacturer payment shall include a detailed statement identifying each claim for which a payment is being remitted and the specific amount for each claim.
- (I) ODA shall not charge a participating pharmacy or the drug mail-order system for the submission of a claim under section 173.80 of the Revised Code nor the processing of a claim under section 173.801 of the Revised Code.
- (J) ODA may not make a payment under section 173.801 of the Revised Code for a claim submitted under section 173.80 of the Revised Code if any of the following are the case:
- (1) The claim is submitted by either a pharmacy that is not a participating pharmacy or a drug mail-order system that is not the system included in the best Rx program pursuant to section 173.78 of the Revised Code;

- (2) The claim is for a drug that is not included in the program;
- (3) The claim is for a drug included in the program but the drug is dispensed to an individual who is not covered by a best Rx program enrollment card; or,
- (4) A person or government entity has paid the participating pharmacy or the drug mail-order system through any other prescription drug coverage program or prescription drug discount program for dispensing the drug, unless the payment is reimbursement for redeeming a coupon or is an amount directly paid by a drug manufacturer to the participating pharmacy or the drug mail-order system for dispensing drugs to residents of a long-term care facility.

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Certification

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Date

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