The Provider Audit Program verifies paid claims against the NIHB Program billing requirements. A valid prescription (as defined by federal and provincial legislation) written by a prescriber (as recognized by the Program) is required for claim reimbursement. Additionally, the applicable NIHB Program policies, administrative requirements and procedures as stipulated in this Kit and the Provider Guide for Pharmacy Benefits must be respected. Claims which have the following audit findings do not meet the Program requirements and are subject to recovery.

<table>
<thead>
<tr>
<th>Audit Finding</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. No quantity indicated</td>
<td>Recover professional fee(s) for original and any refills unless the quantity claimed is:</td>
</tr>
<tr>
<td></td>
<td>- the only size manufactured and the package format is such that it cannot be divided (e.g., inhalers);</td>
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<td></td>
<td>- implicit in the physician’s directions (e.g., tid X 10 days = 30);</td>
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<td></td>
<td>- for an extemporaneous mixture with supporting documentation clarifying the quantity dispensed (e.g., due to stability issues, discussion with client, etc.);</td>
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<tr>
<td></td>
<td>- for an oral contraceptive, in which case client history is sufficient;</td>
</tr>
<tr>
<td></td>
<td>- subsequent to the adapting of a prescription, in which case all the relevant provincial requirements are met, including any required documentation.</td>
</tr>
<tr>
<td>2. Quantity reduction</td>
<td>Professional fee(s) for original and any refills unless:</td>
</tr>
<tr>
<td></td>
<td>- stability limits the quantity dispensed.</td>
</tr>
<tr>
<td>3. Incorrect prescriber ID and/or ID reference #</td>
<td>Recover professional fee for original and any refills. (For both next day claims verifications and on-site audits, the pharmacist is given the opportunity to respond with the correct information.)</td>
</tr>
<tr>
<td>4. Directions missing</td>
<td>Unless directions clarified with prescriber or supported by packaging information or established by a reputable reference AND documented, recover professional fee(s) for original and any refills.</td>
</tr>
<tr>
<td></td>
<td>Note: “as directed” is an acceptable sig. The important consideration is the day supply submitted.</td>
</tr>
<tr>
<td>5. Day supply does not reflect directions</td>
<td>Recover professional fee for original and any refills. (Reasonable latitude is permitted for insulin, topical preparations and ophthalmic drops.)</td>
</tr>
<tr>
<td>6. Incorrect pricing</td>
<td>Unless supported by valid invoices recover excess item cost.</td>
</tr>
<tr>
<td>Audit Finding</td>
<td>Action</td>
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<tr>
<td>-------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>7. Item not picked up by client within 30 days of claims date</td>
<td>Recover drug cost only.</td>
</tr>
<tr>
<td>8. Patient’s name missing or does not correspond with the name transmitted for reimbursement</td>
<td>Recover drug cost and professional fee for original and any refills. (The pharmacist is given the opportunity to provide corroborating evidence. Documentation on the patient's profile confirming the link between the name on the prescription and the alias may be accepted.) A copy of the Identification Card or supporting documentation establishing the link between the names in question. The information required consists of the following: 1. name and surname 2. married name (if need be) 3. alias if known 4. date of birth 5. NIHB client ID # 6. evidence that the name on the prescription corresponds with the name registered with Indian and Northern Affairs Canada</td>
</tr>
<tr>
<td>9. Drug name &amp; strength missing (where multiple strengths exist)</td>
<td>Recover drug cost and professional fee for original and any refills. In those instances where adapting is recognized by NIHB, proper documentation in compliance with provincial standards and regulations is required.</td>
</tr>
<tr>
<td>10. Prescriber’s signature:</td>
<td>Recover drug cost and professional fee for original and any refills. (E-signatures are accepted in those jurisdictions where regulations have been developed.)</td>
</tr>
<tr>
<td>(i) Signature missing or Prescriber is not recognized by NIHB policies for non-physician or dentist prescribers</td>
<td></td>
</tr>
<tr>
<td>(ii) Verbal prescription</td>
<td>Unless clearly documented (e.g., V/O) and prescriber’s name indicated, recover drug cost and professional fee for original and any refills.</td>
</tr>
<tr>
<td>11. Refills exceed quantity authorized</td>
<td>Unless continuity of care is permitted by provincial regulations AND parameters respected, recover total amount paid for excess refills.</td>
</tr>
<tr>
<td>12. Original prescription and hard copy refills missing</td>
<td>Recover drug cost and professional fee for original and any refills.</td>
</tr>
<tr>
<td>13. Filled too soon</td>
<td>Unless supporting documentation and appropriate intervention code justifying early fill, (i.e., before 2/3 of the supply has been used up), recover drug cost and professional fee for all subsequent early refills.</td>
</tr>
<tr>
<td>14. Client has alternate coverage</td>
<td>Recover drug cost and professional fee for original and any refills.</td>
</tr>
<tr>
<td>15. Item not covered or incorrect DIN submitted</td>
<td>Recover drug cost and professional fee for original and any refills.</td>
</tr>
<tr>
<td>16. Claim reversal not sent to claims processor</td>
<td>Recover drug cost and professional fee.</td>
</tr>
<tr>
<td>17. Service insured by other level of government (e.g., Nursing Home, Correctional Institutions, Hospitals)</td>
<td>Recover drug cost and professional fee for original and any refills.</td>
</tr>
<tr>
<td>18. Item billed requires prior approval</td>
<td>Recover drug cost and professional fee for original and any refills.</td>
</tr>
</tbody>
</table>