

Fraud, Waste and Abuse Prevention

POLICY

Serenity Care PACE embraces a culture and enforces policies and procedures that prevent fraud, waste and abuse.

DEFINITIONS

Fraud: The intentional deception or misrepresentation that an individual knows to be false or does not believe to be true and makes, knowing that deception could result in some unauthorized benefit.

Waste: Acting with gross negligence or reckless disregard for the truth in a manner that could result in an unauthorized benefit.

Abuse: Those incidents those are inconsistent with accepted medical or business practices, improper or excessive.

False Claim Act

It is in violation of the False Claims Act to knowingly present, or cause to be presented to the federal government a false or fraudulent claim. In addition, the False Claims Act prohibits knowingly making or using a false record or statement to a get a false or fraudulent claim paid or approved.

OIG Exclusion List is reviewed monthly for all Providers that prescribe medications.

Fraud Waste & Abuse training is provided for all Plan staff, including providers that prescribe medications.

How to Report Fraud, Waste and Abuse – Confidential Hotline (413) 301-9314

PART D Fraud Waste and Abuse Program

Medicare Part D

Medicare offers prescription drug coverage to everyone with Medicare. To get Medicare prescription drug coverage, you must join a plan run by an insurance company or other private company approved by Medicare. Each plan can vary in cost and drugs covered.

The Plan uses only approved on-site primary care providers (PCP) to write prescriptions for Serenity Care PACE participants; no community based PCPs are used. The only exception is “out of network claims or prescriptions” which are reviewed by the Plan’s PCPs and only filled when Plan PCP approval is obtained.

Serenity Care PACE

Procedure:

- Once the PCP writes a prescription, it is documented in the medical record as an order.
- Member medication profile is updated in the record.
- If the medication is prescribed by an outside specialist it is reviewed, approved and cosigned by Serenity Care PACE provider before it is submitted to the pharmacy to be filled.
- The verified prescription/order is submitted to the contracted pharmacy Oxford Valley Pharmacy via fax
- A validated prescription is filled and delivered by FedEx or UPS to Serenity Care PACE Center or to the participant's home.
- All center delivered prescriptions are verified and participants sign once they receive their medication. Home delivered medications are tracked for confirmation of delivery.
- All home delivered medications are sent by FedEx or UPS by the pharmacy two days ahead of submitting the claims to PBM to allow for verification of delivery.
- Each prescription is part of the participant's record.
- PACE home care nurses routinely verify medications during their visit and communicate issues or questions to PCP.
- Participants who do not receive home nursing get their medications reviewed during their routine visits with Primary Care provider.
- Prescriptions are reviewed for accuracy (reconciled) by the PACE Medication Nurse and pharmacy before being filled. In addition, medications are reconciled at every PCP visit to the Center, including annual and semi-annual visits and after any emergency room or hospitalization.
- A sample of prescription to PDE submissions are reviewed for accuracy, on a regular basis.