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Express Communications

Hernandez Settlement Agreement

Please be advised that Express Scripts began administering the pharmacy benefits for certain Florida HMO Medicaid Prescription Plans on December 1, 2009. You are receiving this communication because your pharmacy is dispensing medication for an HMO Medicaid prescription plan in the state of Florida.

To comply with the Hernandez Settlement Agreement (HSA), Express Scripts will begin validating pharmacy performance through unannounced onsite visits to survey conformance with HSA requirements as outlined below.

What Triggers the HSA Process?

An HSA compliance situation arises when an Enrollee attempts to fill a prescription at a Participating Pharmacy Location and is unable to receive his/her prescription as a result of:

- 1. An unreasonable delay in filling the prescription (e.g. inability to resolve a rejection during the Enrollee's pharmacy visit);
- 2. Denial of the prescription;
- 3. Reduction of a prescribed product or service; and/or
- 4. Termination of a prescription.

Pharmacy Requirements under HSA

- 1. Pharmacy must conspicuously display, in English and Spanish, the official posting from the Florida Agency for Health Care Administration notifying Medicare Recipients of their rights under the HSA.
 - <u>http://www.fdhc.state.fl.us/Medicaid/Prescribed_Drug/multi_source.s</u> <u>html</u>

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Express Communications

Hernandez Settlement Agreement (Continued)

- 2. Pharmacy must be in possession of the Florida Agency for Health Care Administration's official handout describing in detail the Medicaid Recipient's right of appeal when medication has been delayed or denied. These documents may be downloaded by visiting the website below:

 <a href="http://www.fdhc.state.fl.us/Medicaid/Prescribed Drug/multi source.state.fl.us/Medicaid/Prescribed Drug/multi source.state.state.fl.us/Medicaid/Prescribed Drug/multi source.state.s
- 3. Pharmacy must provide Enrollee the official pamphlet containing the following elements:
 - a. Date of denial
 - b. Reason for delay or denial in filling the prescription
 - c. Recipient's name and drug name, OR
 - d. A printed copy of the computer screen stating the reason(s) for rejection
 - e. Toll-free HMO phone number along with the Ombudsman number pre-printed in pamphlet.

What will Express Scripts Verify during the Survey Process?

Express Scripts will verify that:

- 1. The official posting from the Florida Agency for Health Care Administration is conspicuously displayed in each pharmacy in English and Spanish.
- 2. Pharmacy has official (pamphlet) handouts for distribution to Medicaid recipients when payment for a prescription is denied or delayed.
- 3. Pharmacy has a policy and procedure or a process document affirming that the Enrollee receives the above information.