

**MILLE LACS BAND OF OJIBWE
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

Department: Health Services-Pharmacy

Policy Number: HHS-HS-PHM 1846

Policy Title: 340B Program Compliance Monitoring and Reporting

Attachments:

Revision History: 9/27/2018

Revised by/Date: Jesse Godding 2/25/2020

Approved by:

Jesse Godding, Pharmacy Manager



Date:

4-21-2020

Approved by:

Nicole Anderson, Commissioner of HHS



Date:

4-22-2020

POLICY STATEMENT: Mille Lacs Band of Ojibwe (MLBO) Indians doing business as Ne-Ia-Shing (NIS) Clinic maintains auditable records demonstrating compliance with 340B Program requirements.

PURPOSE: The purpose of this policy is to provide an internal monitoring program to ensure comprehensive compliance with the 340B Program.

PROCEDURE:

MLBO develops and annual audit plan approved by the internal compliance officer or as determined by organizational policy.

MLBO reviews the HRSA 340B OPAIS to ensure the accuracy of the information for the parent site and off-site locations.

MLBO reviews the Medicaid Exclusion File (MEF) to ensure the accuracy of the information for the parent site and off-site locations.

MLBO reconciles purchasing records and dispensing records to ensure that covered outpatient drugs purchased through the 340B Program are dispensed or administered only to patients eligible to receive 340B drugs and that any variances are not the result of diversion

MLBO reconciles dispensing records to patients' health care records to ensure that all medications dispensed were provided to patients eligible to receive 340B drugs. MLBO will select 20 records from the prescription file and preform the audit monthly.

MLBO reconciles dispensing record and Medicaid billing practices to demonstrate that MLBO's practice is following the Medicaid billing question (carve-in) on the HRSA 340B OPAIS.

MLBO's 340B Oversight Committee reviews the internal audit results every six months.

- a. Assess if audit results are indicative of a material breach per 340B Noncompliance/Material Breach Policy.

MLBO maintains records of 340B-related transactions for a period of 3 years in a readily retrievable and auditable format located in the pharmacy or pharmacy storage area.

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Internal and/or External References	
Compliance - Posting Date	4/22/2020 <i>RFH</i>
Replaces – Policy Number	
Next Review - Due Date	4/23/2021