

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE.

The meeting was called to order by Chairperson Susan Wagle at 1:30 p.m. on January 29, 2002 in Room 231-N, of the Capitol.

All members were present except: Senator Praeger (EA)
Senator Haley (EA)
Senator Steineger
Ms. Emalene Correll, Kansas Legislative Research Department

Committee staff present: Ms. Lisa Montgomery, Revisor of Statute's Office
Ms. Margaret Cianciarulo, Administrative Assistant

Conferees appearing before the committee: Ms. Susan Linn, Executive Secretary / Director ,
KS Board of Pharmacy
Mr. Dave Riley, Auditor, Bland & Associates
Ms. Peggy Stessman, IntegriGuard

Others attending: See attached guest list

Handouts

Chairperson Wagle opened the meeting by referring to the handout from KDHE containing the information requested during the January 16, 2002, Joint Meeting. A copy of the handout is (Attachment 1) attached hereto and incorporated into the Minutes by reference.

Introduction of Bills

With the next order of business, Chairperson Wagle asked for bill introductions.

Ms. Susan Linn, Executive Secretary/Director for the Kansas Board of Pharmacy requested that a bill be introduced concerning the pharmacy act of the state of Kansas. Ms. Linn gave an overview of the changes of the bill from the changes in the application (ex. new license to exam), adding "non-refundable" to keeping part of fine for cost of hearings. A copy of her testimony/bill is (Attachment 2) attached hereto and incorporated into the Minutes by reference.

Chairperson Wagle asked for questions or comments from the committee. Senator Salmans asked for clarification of additional cost found on page 13 and were there fiscal notes. Ms. Linn answered both questions.

The proposed bill was placed before the Committee. Senator Barnett made the motion to introduce the proposed bill. Senator Jordan seconded the motion and the motion carried.

Post audit Review - Medicaid Fraud & Abuse Audit

Chairperson Wagle then introduced Mr. Dave Riley from the auditing firm of Bland & Associates whose firm conducted the audit and was assisted by the firms of IntegriGuard and the Logistics Management Institute.

Mr. Riley began his presentation with SRS statistics mentioning the amount of claims paid under the program exceeded \$1.3 billion for more than 270,000 people receiving Medicaid services, which is a dollar increase of about 47% in 3 years. He stated national statistics indicate approximately 10% of all Medicare and Medicaid payments are fraudulent and if Kansas had a rate of just 2%, the amount of potential fraud would still total more than \$27 million. He went on to explain the common types of fraud, the reviews SRS requests from Blue Cross Blue Shield and federal requirements.

A copy of the "PERFORMANCE AUDIT REPORT Medicaid Cost Containment: Controlling Fraud and Abuse " and his written testimony can be found in Senator Wagle's office.

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE COMMITTEE, Room 231-N,
Statehouse, on January 29, 2002.

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He then introduced Ms. Peggy Stessman from IntegriGuard. Ms. Stessman gave examples of how fraud could work and gave an overview of the testing of a sample of claims processed through the Kansas Medicaid Management Information System (KMMIS) system between November 1, 2000 and October 31, 2001. A copy of her handout is (Attachment 3) attached hereto and incorporated into the Minutes by reference.

Mr. Riley then presented an overview of the guidelines and the Surveillance and Utilization Review (SUR) Units efforts to identify and control Medicaid fraud and abuse. He ended by saying that SRS needs to hold the agent to task and to set objectives. A copy of the above has also been filed in Senator Wagle's office.

Chairperson Wagle then asked for questions and/or comments. A range of questions were presented by Senators Brungardt, Harrington, Salmans, and Barnett from use of the word "fraudulent", who is really doing this fraud, looking at profiling nationally to who appoints the SUR Unit manager.

Adjournment

As there was no further business, the meeting was adjourned. The time was 2:30 p.m.

The next meeting is scheduled for February 4, 2002.



KANSAS DEPARTMENT OF SOCIAL
AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

JANET SCHALANSKY, SECRETARY
January 28, 2002



Barbara J. Hinton
Legislative Post Auditor
Mercantile Bank Tower
800 Southwest Jackson St. #1200
Topeka, KS 66612-2212

Dear Ms. Hinton:

This is in reply to questions you forwarded on behalf of the Legislative Post Audit Committee in your letter of January 15, 2002. They raised several questions related to performance and the costs of the current SUR unit as regards preventing and detecting Medicaid fraud and abuse.

They asked for:

1. Total number of cases processed
2. The number of unique cases
3. The number and dollar amount of potentially fraudulent claims flagged by the system.
4. The number and dollar amount of potentially fraudulent claims
 - investigated by the SUR.
 - investigated by SRS
 - turned over to the Attorney General's Office for prosecution
5. The cost of the SUR unit for fiscal year 2001.
6. Recoveries.

We have three ways to detect and control potentially fraudulent claims:

- Edits: every claim denied by the system for inappropriate billing could potentially be considered a fraudulent claim. Front end edits systematically look for inappropriate billings and deny payment of the claim. On average, we process 10million claims per year and deny about 20% of the claims for reasons such as duplicate billing, billing of services above authorized limits, unbundling of claims, other insurance availability.
- The SUR: in addition the SUR identified and investigated 118 unique provider cases and 64 unique consumer cases that led to a total recovery of \$1,344,851 during FY 2001.
- The Peer Review Organization: in addition the Kansas Foundation for Medical

*Senate Public Health & Welfare Committee
Date: January 29, 2002
attachment 1*



KANSAS DEPARTMENT OF SOCIAL
AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

JANET SCHALANSKY, SECRETARY

Mr. Barbara J. Hinton
January 28, 2002
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Care conducted reviews of hospital inpatient claims that led to the additional recovery of \$6,358,164 during FY 2001.

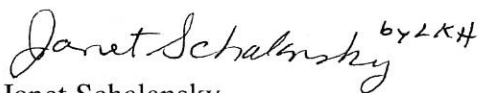
The cost of the SUR unit is included in the operations costs of Blue Cross Blue Shield of Kansas (BCBSKS) and is billed on a per claim/enrollee basis each month. While we do not know how much the unit costs BCBSKS to run each year, we do know that the cost to add a nurse is set at \$52.00 per hour or \$108,160 per year. The unit is currently composed of 9 nurses, 1 assistant manager, 1 data analyst, 1 fraud analyst and 2 administrative assistants.

At this time we do not have compiled data regarding the number and dollar amount of potentially fraudulent claims investigated by the SUR. This is currently in progress. SRS does not have staff in addition to the SUR unit to investigate Medicaid claims.

In calendar year 2000, 14 cases were referred to the Medicaid Fraud Control Unit for potential prosecution.

Thank you for this opportunity to provide information about our fraud and abuse prevention and detection measures. If you have further questions, please contact me.

Sincerely,


Janet Schalansky
Secretary

JS:RMD:lag

cc Laura Howard
Robert M. Day, Ph.D.
SRS File Copy

DRAFT BILL NO. _____

By

AN ACT concerning the pharmacy act of the state of Kansas; licensure and fees relating thereto; civil fines; amending K.S.A. 2001 Supp. 65-1631, 65-1632, 65-1645 and 65-1658 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2001 Supp. 65-1631 is hereby amended to read as follows: 65-1631. (a) It shall be unlawful for any person to practice as a pharmacist in this state unless such person is licensed by the board as a pharmacist. Except as otherwise provided in subsection (d), every applicant for licensure as a pharmacist shall be at least 18 years of age, shall be a graduate of a school or college of pharmacy or department of a university recognized and approved by the board, shall file proof satisfactory to the board, substantiated by proper affidavits, of a minimum of one year of pharmaceutical experience, acceptable to the board, under the supervision of a preceptor and shall pass an examination administered by the board. Pharmaceutical experience as required in this section shall be under the supervision of a preceptor and shall be predominantly related to the dispensing of prescription medication, compounding prescriptions, preparing pharmaceutical preparations and keeping records and making reports required under state and federal statutes. A school or college of pharmacy or department of a university recognized and approved by the board under this subsection (a) shall have a standard of education not below that of the university of Kansas school of pharmacy. The board shall adopt rules and regulations

Senate Public Health & Welfare Committee
Date: January 29, 2002
Attachment 2

establishing the criteria which a school or college of pharmacy or department of a university shall satisfy in meeting the standard of education established under this subsection (a).

(b) All applications for examinations licensure by examination shall be made on a form to be prescribed and furnished by the board ~~and shall be filed with the board at least 30 days before examinations are to be held.~~ Each application ~~must~~ for licensure by examination shall be accompanied by an examination application fee fixed by the board as provided in K.S.A. 65-1645 and amendments thereto ~~unless the board requires the examination fees be paid directly to an examination service as provided in K.S.A. 65-1645 and amendments thereto.~~

(c) The board is authorized to adopt rules and regulations relating to the grades which an applicant must receive in order to pass the examination.

(d) Notwithstanding the preceding provisions of this section, the board may in its discretion license as a pharmacist, without examination, any person who is duly registered or licensed by examination in some other state, except that the board may require that such person take the law examination ~~administered~~ approved by the board. Such person shall file proof satisfactory to the board of having the education and training required of applicants for licensure under the provisions of the pharmacy act of this state. Persons who are registered or licensed as pharmacists by examination in other states shall be required to satisfy only the requirements which existed in this

state at the time they become registered or licensed in such other states. The provisions of this subsection shall apply only if the state in which the person is registered or licensed grants, under like conditions, reciprocal registrations or licenses as pharmacists, without examination, to pharmacists duly licensed by examination in this state. Reciprocal licensure shall not be denied to any applicant otherwise qualified for reciprocal licensure under this section who has met the internship requirements of the state from which the applicant is reciprocating or who has at least one year of practice as a licensed pharmacist. A reciprocal licensure may be denied for any of the reasons set forth in subsections (a)(1) through (a)(13) of K.S.A. 65-1627 and amendments thereto.

(e) In the event that an applicant for reciprocal licensure has not been subject to laws requiring continuing education as a condition for renewal of a registration or license, such applicant shall be required to satisfy the board through a competency examination that the applicant has the knowledge and ability to meet Kansas standards for licensure as a pharmacist.

(f) No applicant who has taken the examination for licensure ~~given~~ approved by the board and has failed to complete it successfully shall be considered for licensure by reciprocity within one year from the date such applicant sat for the examination.

(g) All applicants for reciprocal licensure shall file their applications on a form to be prescribed and furnished by the

board and such application shall be accompanied by a reciprocal licensure fee fixed by the board as provided in K.S.A. 65-1645 and amendments thereto. The reciprocal licensure fee established by this section immediately prior to the effective date of this act shall continue in effect until a different reciprocal licensure fee is fixed by the board by rules and regulations as provided in K.S.A. 65-1645 and amendments thereto.

(h) The board shall take into consideration any felony conviction of such person, but such conviction shall not automatically operate as a bar to licensure.

(i) All applicants for licensure who graduate from a school or college of pharmacy outside the United States or who graduate from a school or college of pharmacy not approved by the board shall submit information to the board, as specified by rules and regulations, and this information shall be accompanied by an evaluation fee fixed by the board as provided in K.S.A. 65-1645 and amendments thereto, which evaluation fee shall be in addition to any other fee paid by the applicant under the pharmacy act of the state of Kansas. The evaluation fee fixed by the board under this section immediately prior to the effective date of this act shall continue in effect until a different evaluation fee is fixed by the board by rules and regulations as provided in K.S.A. 65-1645 and amendments thereto. The board may contract with investigative agencies, commissions or consultants to assist the board in obtaining information about such schools or colleges of pharmacy. In entering such contracts the authority to approve

schools or colleges of pharmacy shall remain solely with the board.

(j) All applicants for licensure who graduate from a school or college of pharmacy outside the United States or who are not citizens of the United States shall provide proof to the board that the applicant has a reasonable ability to communicate with the general public in English. The board may require such applicant to take the test of English as a foreign language and to attain the grade for passing such test as established by the board by rules and regulations.

(k) Every registered pharmacist holding a valid registration as a pharmacist in effect on the day preceding the effective date of this act shall be deemed to be a licensed pharmacist under this act, and such person shall not be required to file an original application hereunder for a license.

Sec. 2. K.S.A. 2001 Supp. 65-1632 is hereby amended to read as follows: 65-1632. (a) Each license to practice as a pharmacist issued by the board, shall expire on June 30 of the year specified by the board for the expiration of the license and shall be renewed on a biennial basis in accordance with this section. Each application for renewal of a license as a pharmacist shall be made on a form prescribed and furnished by the board. Except as otherwise provided in this subsection, the application, when accompanied by the renewal fee and received by the executive secretary of the board on or before the date of expiration of the license, shall have the effect of temporarily

renewing the applicant's license until actual issuance or denial of the renewal. If at the time of filing a proceeding is pending before the board which may result in the suspension, probation, revocation or denial of the applicant's license, the board may by emergency order declare that the application for renewal shall not have the effect of temporarily renewing such applicant's license. Every licensed pharmacist shall pay to the secretary of the board a renewal fee fixed by the board as provided in K.S.A. 65-1645 and amendments thereto.

(b) Commencing with the renewal of licenses which expire on June 30, 1998, each license shall be renewed on a biennial basis. To provide for a system of biennial renewal of licenses, the board may provide by rules and regulations that licenses issued or renewed may expire less than two years from the date of issuance or renewal.

(c) The board may deny renewal of any license of a pharmacist on any ground which would authorize the board to deny an initial application for licensure or on any ground which would authorize the board to suspend, revoke or place on probation a license previously granted. Orders under this section, and proceedings thereon, shall be subject to the provisions of the Kansas administrative procedure act.

(d) The payment of the renewal fee by a person who is a holder of a license as a pharmacist shall entitle the person to renewal of license if no grounds exist for denying the renewal of the license and if the person has furnished satisfactory evidence

to the board that the person has successfully complied with the rules and regulations of the board relating to continuing professional education. These educational requirements shall be fixed by the board at not less than 20 clock hours nor more than 40 clock hours biennially of a program of continuing education approved by the board. Continuing education hours may be prorated for licensure periods which are less than biennial in accordance with rules and regulations of the board. The maximum number of continuing education hours required by the board to meet the requirements for cancellation of inactive status licensure and renewal of license under subsection (e) or reinstatement of license because of nonpayment of fees under subsection (f) shall not exceed 60.

(e) The payment of the renewal fee by the person who is a holder of a license as a pharmacist but who has not complied with the continuing education requirements fixed by the board, if no grounds exist for denying the renewal of the license other than that the person has not complied with the continuing education requirements fixed by the board, shall entitle the person to inactive status licensure by the board. No person holding an inactive status license from the board shall engage in the practice of pharmacy in this state. Upon furnishing satisfactory evidence to the board of compliance with the continuing education requirements fixed by the board and upon the payment to the board of all applicable fees, a person holding an inactive status license from the board shall be entitled to cancellation of the

inactive status license and to renewal of licensure as a pharmacist.

(f) If the renewal fee for any pharmacist's license has not been paid by August 1 of the renewal year, the license is hereby declared void, and no license shall be reinstated except upon payment of any unpaid renewal fee plus a penalty fee fixed by the board as provided in K.S.A. 65-1645 and amendments thereto and proof satisfactory to the board of compliance with the continuing education requirements fixed by the board. The penalty fee established by this section immediately prior to the effective date of the act shall continue in effect until a different penalty fee is fixed by the board by rules and regulations as provided in K.S.A. 65-1645 and amendments thereto. Payment of any unpaid renewal fee plus a penalty fee and the submission of proof satisfactory to the board of compliance with the continuing education requirements fixed by the board shall entitle the license to be reinstated. The nonpayment of renewal fees by a previously licensed pharmacist for a period exceeding three years shall not deprive the previously licensed pharmacist of the right to reinstate the license upon the payment of any unpaid fees and penalties and upon compliance with the continuing education requirements fixed by the board, except that the board may require such previously licensed pharmacist to take and pass an examination approved by the board for reinstatement as a pharmacist and to pay any applicable ~~examination~~ application fee.

Sec. 3. K.S.A. 2001 Supp. 65-1645 is hereby amended to read

as follows: 65-1645. (a) Application for registrations or permits under K.S.A. 65-1643 and amendments thereto shall be made on a form prescribed and furnished by the board. Applications for registration to distribute at wholesale any drugs shall contain such information as may be required by the board in accordance with the provisions of K.S.A. 65-1655 and amendments thereto. The application shall be accompanied by the fee prescribed by the board under the provisions of this section. When such application and fees are received by the executive secretary of the board on or before the due date, such application shall have the effect of temporarily renewing the applicant's registration or permit until actual issuance or denial of the renewal. However, if at the time of filing a proceeding is pending before the board which may result in the suspension, probation, revocation or denial of the applicant's registration or permit, the board may declare, by emergency order, that such application for renewal shall not have the effect of temporarily renewing such applicant's registration or permit. Separate applications shall be made and separate registrations or permits issued for each separate place at which is carried on any of the operations for which a registration or permit is required by K.S.A. 65-1643 and amendments thereto except that the board may provide for a single registration for a business entity registered to manufacture any drugs or registered to distribute at wholesale any drugs and operating more than one facility within the state, or for a parent entity with divisions, subsidiaries or affiliate companies, or any combination thereof,

the provisions of K.S.A. 65-1643 and amendments thereto. Registrations and permits issued under the provisions of K.S.A. 65-1643 and 65-1644 and amendments thereto shall be conspicuously displayed in the place for which the registration or permit was granted. Such registrations or permits shall not be transferable. All such registrations and permits except retail dealer permits shall expire on June 30 following date of issuance. Retail dealers' permits shall expire on the last day of February. All registrations and permits shall be renewed annually. Application blanks for renewal of registrations and permits shall be mailed by the board to each registrant or permittee at least 30 days prior to expiration of the registration or permit. If application for renewal is not made before 30 days after such expiration, the existing registration or permit shall lapse and become null and void on the date of its expiration, and no new registration or permit shall be granted except upon payment of the required renewal fee plus a penalty equal to the renewal fee. Failure of any registrant or permittee to receive such application blank shall not relieve the registrant or permittee from the penalty hereby imposed if the renewal is not made as prescribed.

(f) In each case in which a license of a pharmacist is issued or renewed for a period of time less than two years, the board shall prorate to the nearest whole month the license or renewal fee established pursuant to K.S.A. 65-1645 and amendments thereto.

(g) The board may require that fees paid for any examination

under the pharmacy act of the state of Kansas be paid directly to the examination service by the person taking the examination.

Sec. 4. K.S.A. 2001 Supp. 65-1658 is hereby amended to read as follows: 65-1658. The state board of pharmacy, in addition to any other penalty prescribed under the pharmacy act of the state of Kansas, may assess a civil fine, after notice and an opportunity to be heard in accordance with the Kansas administrative procedure act, against any licensee or registrant under subsections (a), (c), (d) and (e) of K.S.A. 65-1627, and amendments thereto, for violation of the pharmacy act of the state of Kansas or rules and regulations of the state board of pharmacy adopted under the pharmacy act of the state of Kansas or for violation of the uniform controlled substances act or rules and regulations of the state board of pharmacy adopted under the uniform controlled substances act, in an amount not to exceed \$5,000 for each violation. All fines assessed and collected under this section shall be remitted to the state treasurer in accordance with the provisions of K.S.A. 75-4215, and amendments thereto. Upon receipt of each such remittance, the state treasurer shall deposit the entire amount in the state treasury to the credit of the state general fund. Of the amount so remitted, an amount equal to the board's actual costs related to the case in which the fine was assessed, as certified by the president of the board to the state treasurer, shall be credited to the state board of pharmacy fee fund, and the balance shall be credited to the state general fund.

Sec. 5. K.S.A. 2001 Supp. 65-1631, 65-1632, 65-1645 and 65-1658 are hereby repealed.

Sec. 6. This act shall take effect and be in force from and after its publication in the statute book.

State of Kansas Legislative Division of Post Audit

Cost Containment: Controlling Medicaid Fraud and Abuse

IntegriGuard, A Division of California Medical Review

January 29, 2002



Senate Public Health & Welfare Committee
Date: January 29, 2002
attachment 3

Medical Record Review

Results and Recommendations

This report summarizes the processes utilized in the review of medical record documentation from selected providers enrolled in the Kansas Medicaid program. Additionally, this report provides recommendations for Medicaid policy, provider education and considerations for future audits.

Background

IntegriGuard, a division of California Medical Review Inc, participated in a performance audit of the State of Kansas Medicaid Cost Containment Program with Bland and Associates at the direction of the Kansas Legislative Post Audit Committee. One function provided by IntegriGuard was the review of documentation submitted by providers against policy established by the Kansas Medicaid Program. The review also considered standards of practice related to medical documentation. These standards include:

- ◆ Entries are made in the medical record for each patient contact
- ◆ Entries are dated and signed by the provider rendering service
- ◆ Entries are legible
- ◆ Treatment is based on documented assessments, and a written treatment plan which considers the patient's strengths and includes the patient's or patient's

family input.

A medical record review tool was developed to record the presence or absence of required components in the medical record. The tool was modified from the Joint Commission Accreditation on Healthcare Organization record audit tool to include components specific for ambulatory care.

Process

A letter, dated December 14, 2001, was sent to a select group of Kansas Medicaid providers requesting the medical records of a specific Medicaid beneficiary be submitted to IntegriGuard. The letter indicated that the records were expected at the IntegriGuard office by December 31, 2001. The letter, which was sent by the Legislative Division of Post Audit, provided the beneficiary's name, claim number, patient identification number, and internal reference number.

Upon receipt of the medical record, the documentation was reviewed by a Registered Nurse and, if necessary, a Physician. Conditions requiring review by the Physician include, but are not limited to,:

- ◆ Treatment rendered not included in the treatment plan
- ◆ Use of diagnostic tests and procedure not normally associated with the diagnosis

Medical Record Review Results and Recommendations

- ◆ Prolonged course of treatment with out documented improvement
- ◆ Experimental treatment

A summary of each reviewed record was drafted which includes each line of claim detail, the date of service, procedure code, procedure code description, units billed and units approved. The summary also describes the overall impression of the documentation in the record and if the record was sent for review by the Physician, no action taken or, if the claim is recommended for re-pricing.

Medical Record Results

Nine requests for records to support claims were sent for the review. Records for eight beneficiaries were received from the sample. Documentation in three, or one-third, of the records did not support the billed services.

The total dollar amount related to the claims reviewed in the sample is \$457.93. Based on the results of the medical review, the recommended payment amount for the total claims was reduced to \$259.92, resulting in a savings of 43% to the Kansas Medicaid Fund.

The table on Page 4 summarizes the results of the individual record reviews.

Recommendations

According to the Urban Institute and Kaiser Commission on Medicaid and the Uninsured on-line information, Medicaid (State and Federal) spending for the State of Kansas in FY 1998 totaled \$1,070,074,435. State only Medicaid spending for Kansas equaled \$431,132,990 for this same time. If the results of this small medical review were representative of the Kansas Medicaid program and assuming that the same fraction of documentation is lacking, then approximately one-third or \$142,273,887 of the State's contribution toward paid claims was not supported by the provider's documentation.

It is acknowledged that the sample size in this review is very small and most likely not representative of the Medicaid provider group in the State of Kansas . However, since the review did reveal that one-third of solicited providers did not submit adequate documentation to support filed claims, it is recommended that a larger review be commissioned to draw a more representative baseline that would target the non-compliant providers.

Medical Record Review Results and Recommendations

Table 1— Individual Record Review Results

Claim Number	Provider Number	Paid Amount	Recommended Payment Amount	Observations
4800339002368	4286119402	\$41.26	\$41.26	Documentation complete with physical assessment, diagnostic procedures, treatment provided and patient education.
1501114000429	2050664401	\$41.14	\$0.00	Submitted documentation lacked record of assessment, physician orders, and treatment plan for the date of service.
6001082012062	2086295105	\$2.00	\$0.00	Provider did not submit records for the requested date of service/claim number.
1501247903554	2429752701	\$40.00	\$40.00	Routine office visit for 2 year old female. Appropriate review of systems and physical exam performed.
4501269006212	2050454502	\$99.26	\$99.26	Documentation for date of service verifies the services as submitted on claim.
1501045000577	2021907102	\$72.40	\$72.40	Six week post delivery of a high risk pregnancy. Services and treatment appropriate for patient; documentation present to support claim.
1701236000633	2021010401	\$41.68	\$0.00	Although diagnostic tests performed were appropriate for the patient, the record lacks documentation of a physical exam or physician orders for the testing. An previous note (3 months prior) indicates that another physician has ordered the tests. It is unclear from the record which physician ordered the tests for the date of service in question.
1800325002376	5924215501	\$58.00	\$58.00	Documentation meets requirements for services rendered.
4601088000741	2050290601	\$62.19	\$0.00	Records not submitted for review.