

SENATE BILL NO. 33

BY SENATOR CHEEK AND REPRESENTATIVES ABRAMSON, BURFORD, DOERGE, HILL, HINES, MICHAEL JACKSON, JOHNSON, LABRUZZO, LEBAS, MILLS, NOWLIN, POPE, WILLIAMS AND WOOTON

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AN ACT

To amend and reenact R.S. 46:446.6(B)(3) and the introductory paragraph of R.S. 46:446.6(B)(4), and to enact R.S. 46:446.6(C), (D), and (E), relative to medical assistance payments; to provide for the period of time within which a health care provider must submit payment to the Department of Health and Hospitals; to provide for reimbursements of monies paid erroneously under the Louisiana Medical Assistance Program; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 46:446.6(B)(3) and the introductory paragraph of R.S. 46:446.6(B)(4) are hereby amended and reenacted and R.S. 46:446.6(C), (D), and (E) are hereby enacted to read as follows:

§446.6. Definitions; requirements of health insurers for the Department of Health and Hospital's and health care provider's right to recover in Medicaid claims

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B. As a condition of conducting business in Louisiana, health insurers shall:

* * *

(3) ~~Respond to any inquiry by~~ Submit payment within ninety days to the department regarding a subrogation claim for payment for any health care item or service submitted no later than three years after the date of the provision of the health care item or service.

(4) Agree not to deny a claim submitted by the department or health care provider on the basis of the date of the submission of the claim, the type or format of the claim form, or the failure to present proper documentation at the point of sale which is the basis of the claim, if all of the following conditions apply:

* * *

1 C. Health care providers shall have a right to recovery for the difference
 2 between the health insurer's original obligation for services provided to the
 3 insured and the amount the health care provider received from Medicaid,
 4 provided that the amount of the original obligation exceeds the amount paid by
 5 Medicaid.

6 D. The Department of Health and Hospitals shall provide notice to each
 7 appropriate health care provider after payments is received from a health
 8 insurer. Notwithstanding any contractual prescriptive period for filing of
 9 claims by the health provider to the health insurer, reimbursement to the
 10 Department of Health and Hospitals of monies paid erroneously under the
 11 Louisiana Medical Assistance Program under this Section shall constitute an
 12 admission of an obligation to the health care provider for the difference as
 13 described in Subsection C of this Section. An insurer shall only be liable for
 14 such payment if the provider files the claim with the insurer within sixty days
 15 of receipt of notice from the Department of Health and Hospitals, and the claim
 16 meets the requirements of Paragraph (B)(4) of this Section. The health insurer
 17 shall pay any obligation on the claim within sixty days of the receipt of the
 18 claim.

19 E. No health insurer shall be liable for any payments under this Section
 20 that exceed the maximum benefits payable under the applicable insurance
 21 contract, regardless of whether such maximum was reached subsequent to the
 22 date that a claim described in Subsection D of this Section was originally
 23 submitted to Medicaid.

PRESIDENT OF THE SENATE

SPEAKER OF THE HOUSE OF REPRESENTATIVES

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: _____