



General Assembly

February Session, 2020

Raised Bill No. 5309

LCO No. 1698



Referred to Committee on HUMAN SERVICES

Introduced by:
(HS)

AN ACT CONCERNING MEDICAID AUDITS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subdivision (4) of subsection (d) of section 17b-99 of the
2 general statutes is repealed and the following is substituted in lieu
3 thereof (*Effective July 1, 2020*):

4 (4) A finding of overpayment or underpayment to a provider in a
5 program operated or administered by the department pursuant to this
6 chapter or chapter 319t, 319v, 319y or 319ff, except a provider for which
7 rates are established pursuant to section 17b-340, shall not be based on
8 extrapolation (A) if the finding results from a clerical error, or (B) unless
9 the total net amount of extrapolated overpayment not resulting from a
10 clerical error calculated from a statistically valid sampling and
11 extrapolation methodology exceeds one and three-quarters per cent of
12 total claims paid to the provider for the audit period. In the event of a
13 finding of overpayment or underpayment by the state based on a
14 provider clerical error, state recovery of costs shall be limited to any
15 overpayment to the provider and administrative expenses related to
16 investigation of the clerical error.

This act shall take effect as follows and shall amend the following sections:		
---	--	--

Section 1	<i>July 1, 2020</i>	17b-99(d)(4)
-----------	---------------------	--------------

Statement of Purpose:

To eliminate extrapolation of provider clerical errors in Medicaid audits and limit recovery by the state against such providers to any resulting overpayment and state administrative expenses related to investigation of the clerical error.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]