CHAPTER
332
PUBLIC LAW

STATE OF MAINE

IN THE YEAR OF OUR LORD

TWO THOUSAND TWENTY-THREE

H.P. 792 - L.D. 1244

An Act to Define Undisputed Health Insurance Claims

Be it enacted by the People of the State of Maine as follows:

- **Sec. 1. 24-A MRSA §2436, sub-§2-A,** as repealed and replaced by PL 2009, c. 613, §9, is amended to read:
- **2-A.** For a claim submitted by a health care provider or health care facility with respect to a health plan <u>carrier</u> as defined in section 4301-A, subsection 7 <u>3</u>, for purposes of this section, "undisputed claim" means a timely claim for payment of covered health care expenses that is <u>must be</u> submitted to a carrier in conformity with the following requirements for standardized claim forms set forth in section 2753.
 - A. The claim must be submitted on one of the following claims forms:
 - (1) For a health care facility claim submitted on paper, the standard claim form, using standards approved by a national uniform billing committee;
 - (2) For a health care provider claim submitted on paper, the standard claim form, using standards approved by a national uniform claim committee; and
 - (3) For health care facility and health care provider claims submitted electronically, an electronic form using standards approved by an accredited standards committee of the American National Standards Institute.
- **Sec. 2. 24-A MRSA §2436, sub-§2-B,** as enacted by PL 2009, c. 613, §10, is amended to read:
- **2-B.** If a claim does not conform to the requirements specified in subsection subsections 2-A and 2-C and payment is denied to a health care provider or health care facility by a carrier, the health care provider or health care facility may not request payment from the insured or beneficiary and shall attempt to rectify the deficiencies with the claim and resubmit the claim to the carrier.
 - Sec. 3. 24-A MRSA §2436, sub-§2-C is enacted to read:
- **2-C.** For a claim submitted by a health care provider or health care facility with respect to a carrier as defined in section 4301-A, subsection 3, for purposes of this section,

"undisputed claim" means a manually or electronically submitted claim from a health care provider or health care facility that:

- A. Contains all the required data elements necessary for accurate adjudication without the need for additional information;
- B. Is not materially deficient or improper, including lacking substantiating documentation required by the carrier; and
- C. Has no particular or unusual circumstances requiring special treatment that prevent payment from being made by the carrier.