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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-NINTH SESSION

H. F. No. 707

02/09/2015 Authored by Zerwas

The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to human services; setting requirements for timely billing by health care
1.3 providers; amending Minnesota Statutes 2014, section 256B.69, by adding a
1.4 subdivision.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2014, section 256B.69, is amended by adding a
1.7 subdivision to read:

1.8 Subd. 36. **Timely billing.** (a) Managed care and county-based purchasing plans
1.9 shall not implement timely billing requirements for health care providers under contract
1.10 with timelines for claim submission that are shorter than the following:

1.11 (1) 12 months from the date of service for claims submitted correctly, including
1.12 Medicare crossover and third-party liability claims;

1.13 (2) six months from the date of incorrect payment or 12 months from the date of
1.14 service, whichever is greater, for replacement claims;

1.15 (3) six months from the Medicare determination/adjudication date or 12 months
1.16 from the date of service, whichever is greater, for Medicare crossover claims that do
1.17 not automatically cross over; and

1.18 (4) 12 months from the date of service or six months from the date of county
1.19 correction, whichever is greater, for resubmission of claims that have been denied
1.20 erroneously due to system error or incorrect information from the county.

1.21 (b) Managed care or county-based purchasing plans must allow health care providers
1.22 to submit claims that are over one year old with appropriate, dated documentation, but are
1.23 not obligated to pay these claims.