

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25

HOUSE BILL 44

53RD LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2018

INTRODUCED BY

Elizabeth "Liz" Thomson

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO HEALTH COVERAGE; ENACTING SECTIONS OF THE HEALTH CARE PURCHASING ACT, THE PUBLIC ASSISTANCE ACT, THE NEW MEXICO INSURANCE CODE, THE HEALTH MAINTENANCE ORGANIZATION LAW AND THE NONPROFIT HEALTH CARE PLAN LAW TO ESTABLISH A LIMITATION ON RECOUPMENT OR RETROACTIVE DENIAL OF PROVIDER CLAIMS.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Health Care Purchasing Act is enacted to read:

"~~[NEW MATERIAL]~~ CLAIM RECOUPMENT--RETROACTIVE DENIAL OF CLAIM--LIMITATION ON ACTION.--Except in cases of fraud, a group health plan shall only seek to recoup payment from a provider of a claim submitted by the provider, or retroactively deny reimbursement to a provider for a claim submitted by the provider, during the twelve-month period after the date the

underscored material = new
~~[bracketed material]~~ = delete

underscored material = new
[bracketed material] = delete

1 group health plan paid the claim in question."

2 SECTION 2. A new section of the Public Assistance Act is
3 enacted to read:

4 "[NEW MATERIAL] MEDICAID CLAIM RECOUPMENT--RETROACTIVE
5 DENIAL OF MEDICAID CLAIM--LIMITATION ON ACTION.--Except in
6 cases of fraud, a plan that provides medical assistance
7 coverage shall only seek to recoup payment from a provider of a
8 claim submitted by the provider, or retroactively deny
9 reimbursement to a provider for a claim submitted by the
10 provider, during the twelve-month period after the date the
11 medical assistance plan paid the claim in question."

12 SECTION 3. A new section of Chapter 59A, Article 22 NMSA
13 1978 is enacted to read:

14 "[NEW MATERIAL] CLAIM RECOUPMENT--RETROACTIVE DENIAL OF
15 CLAIM--LIMITATION ON ACTION.--Except in cases of fraud, an
16 insurer shall only seek to recoup payment from a provider of a
17 claim submitted by the provider, or retroactively deny
18 reimbursement to a provider for a claim submitted by the
19 provider, during the twelve-month period after the date the
20 insurer paid the claim in question."

21 SECTION 4. A new section of Chapter 59A, Article 23 NMSA
22 1978 is enacted to read:

23 "[NEW MATERIAL] CLAIM RECOUPMENT--RETROACTIVE DENIAL OF
24 CLAIM--LIMITATION ON ACTION.--Except in cases of fraud, an
25 insurer shall only seek to recoup payment from a provider of a

underscored material = new
[bracketed material] = delete

1 claim submitted by the provider, or retroactively deny
2 reimbursement to a provider for a claim submitted by the
3 provider, during the twelve-month period after the date the
4 insurer paid the claim in question."

5 SECTION 5. A new section of the Health Maintenance
6 Organization Law is enacted to read:

7 "[NEW MATERIAL] CLAIM RECOUPMENT--RETROACTIVE DENIAL OF
8 CLAIM--LIMITATION ON ACTION.--Except in cases of fraud, a
9 carrier shall only seek to recoup payment from a provider of a
10 claim submitted by the provider, or retroactively deny
11 reimbursement to a provider for a claim submitted by the
12 provider, during the twelve-month period after the date the
13 carrier paid the claim in question."

14 SECTION 6. A new section of the Nonprofit Health Care
15 Plan Law is enacted to read:

16 "[NEW MATERIAL] CLAIM RECOUPMENT--RETROACTIVE DENIAL OF
17 CLAIM--LIMITATION ON ACTION.--Except in cases of fraud, a
18 health care plan shall only seek to recoup payment from a
19 provider of a claim submitted by the provider, or retroactively
20 deny reimbursement to a provider for a claim submitted by the
21 provider, during the twelve-month period after the date the
22 health care plan paid the claim in question."