

STATE OF MAINE

IN THE YEAR OF OUR LORD

TWO THOUSAND TWENTY-THREE

S.P. 51 - L.D. 84

**An Act to Strengthen Third-party Liability Requirements for the MaineCare Program**

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

**Sec. 1. 22 MRSA §14, sub-§2-H**, as amended by PL 2007, c. 240, Pt. JJJ, §§2 and 3 and c. 448, §8 and affected by §14, is further amended to read:

**2-H. Honoring of assignments.** The following provisions apply to claims for payment submitted by the department or a health care provider.

A. Whenever the department submits claims to a health insurer, as included in 42 United States Code, Section 1396a(a)(25)(I), including self-insured plans, group health plans as defined in the federal Employee Retirement Income Security Act of 1974, Section 607(1), service benefit plans, managed care organizations, pharmacy benefit managers or other parties that are, by statute, contract or agreement, legally responsible for payment of a claim for a health care item or service, on behalf of a current or former recipient under the MaineCare program for whom an assignment of rights has been received, or whose rights have been assigned by the operation of law, the health insurer doing business in the State or providing coverage to a resident of this State must respond to the department within 60 days and:

(1) Provide information, with respect to individuals who are eligible for or are provided medical assistance under the MaineCare program, upon the request of the State, to determine during what period the individual or the individual's spouse or dependents may be or may have been covered by a health insurer and the nature of the coverage that is or was provided by the health insurer, including the name, address and identifying number of the plan, in a manner prescribed by the United States Secretary of Health and Human Services;

(2) Accept the State's right of recovery and the assignment to the State of any right of an individual or other entity to payment from the party for an item or service for which payment has been made under the state plan and, in the case of a responsible 3rd party that requires prior authorization for an item or service furnished to an individual eligible to receive medical assistance under the MaineCare program, accept authorization provided by the State that the item or service is covered under

the MaineCare program for that individual, as if the authorization were the prior authorization made by the 3rd party for the item or service;

(3) Respond to any inquiry by the State regarding a claim for payment for any health care item or service that is submitted not later than 3 years after the date of the provision of such health care item or service; and

(4) Agree not to deny a claim submitted by the State solely on the basis of the date of submission of the claim, the type or format of the claim form or a failure to present proper documentation at the point-of-sale that is the basis of the claim or, in the case of a responsible 3rd party, a failure to obtain a prior authorization for the item or service for which the claim is being submitted, if:

(a) The claim is submitted by the State within the 3-year period beginning on the date on which the item or service was furnished; and

(b) Any action by the State to enforce its rights with respect to such claim is commenced within 6 years of the State's submission of such claim.

C. A payment made as part of an assignment by a 3rd party to the MaineCare program or a contractor acting on behalf of the MaineCare program is considered final 2 years after the date of the payment and when final the payment is not subject to adjustment.