HOUSE FILE 736
BY COMMITTEE ON HUMAN RESOURCES

(SUCCESSOR TO HSB 225)

(As Amended and Passed by the House March 24, 2021)

[= New Language by the House

A BILL FOR

An Act relating to limitations on activities related to paid claims under the Medicaid program, and including effective date provisions.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

Section 1. MEDICAID PROGRAM — LIMITATIONS ON ACTIVITIES RELATED TO PAID CLAIMS — RESUBMISSION. Notwithstanding any provision of law to the contrary, any post-payment review of Medicaid provider claims paid under either Medicaid fee-for-service or managed care administration that do not involve fraud or misrepresentation shall be limited to a review of only those claims for which no more than twenty-four months have elapsed since the date of payment of the claim. Additionally, any provider overpayment identified for which twenty-four months or more have elapsed since the date of payment of the claim shall not be subject to repayment or to offset against future reimbursement of claims by the provider. [The limitations specified in this section shall not apply to retroactive Medicaid cost settlements or rate changes based on a Medicaid or Medicare cost report.] Any improper payment identified through a review may be resubmitted by the provider as a claims adjustment.

Sec. 2. EFFECTIVE DATE. This Act, being deemed of immediate importance, takes effect upon enactment.