Stricken language would be deleted from and underlined language would be added to present law. Act 1269 of the Regular Session

1	State of Arkansas	A D'11	
2	90th General Assembly	A Bill	
3	Regular Session, 2015		SENATE BILL 831
4			
5	By: Senator D. Sanders		
6			
7		For An Act To Be Entitled	
8	AN ACT T	O AUTHORIZE THE DIRECTOR OF THE DIVISION	OF
9	MEDICAL	SERVICES OF THE DEPARTMENT OF HUMAN SERVI	CES
10	TO DETER	MINE THAT A MEDICAID PROVIDER IS OUT OF	
11	BUSINESS	AND THAT A MEDICAID OVERPAYMENT OWED BY	THE
12	MEDICAID	PROVIDER CANNOT BE COLLECTED UNDER STATE	LAW
13	AND PROC	EDURES; AND FOR OTHER PURPOSES.	
14			
15			
16		Subtitle	
17	ТО	AUTHORIZE THE DIRECTOR OF THE DIVISION	
18	OF	MEDICAL SERVICES OF THE DEPARTMENT OF	
19	HUM	IAN SERVICES TO DETERMINE THAT A	
20	MED	ICAID PROVIDER IS OUT OF BUSINESS AND	
21	THA	T A MEDICAID OVERPAYMENT CANNOT BE	
22	COL	LECTED.	
23			
24			
25	BE IT ENACTED BY THE	GENERAL ASSEMBLY OF THE STATE OF ARKANSA	\S:
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27	SECTION 1. Ar	kansas Code Title 20, Chapter 77, Subchap	ter l, is
28	amended to add an ad	ditional section to read as follows:	
29	<u>20-77-131. De</u>	termination that a Medicaid provider is c	out of business.
30	<u>(a) As used i</u>	n this section, "entity" means:	
31	<u>(1) A c</u>	orporation, including without limitation	<u>a professional,</u>
32	<u>medical, or dental c</u>	orporation;	
33	<u>(2) A 1</u>	imited liability company, including withc	out limitation a
34	professional, medica	l, or dental limited liability company; a	and
35	<u>(3) A p</u>	artnership, including without limitation	a limited
36	partnership.		



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1	(b)(1) For the purpose of determining whether an overpayment must be
2	refunded to the federal government, the Director of the Division of Medical
3	Services of the Department of Human Services is authorized to determine and
4	certify that a Medicaid provider is out of business and that an overpayment
5	owed by the provider cannot be collected under state law and procedures.
6	(2) The director may make this determination on the basis of any
7	facts and circumstances deemed relevant and material by the director.
8	(c) For the purpose of this section, the director may conclusively
9	presume a provider to be out of business as of:
10	(1) The date of suspension, expiration, surrender, or revocation
11	of a license or certification required for the provider to operate; or
12	(2) For a provider that did business in the form of an entity,
13	the date of:
14	(A) Dissolution of the entity;
15	(B) Occurrence of an event which would trigger
16	dissolution; or
17	(C) Forfeiture or revocation of the entity's charter or
18	authority to do business by the Secretary of State or other state authority.
19	(d) A determination or certification made by the director under this
20	section:
21	(1) Does not abrogate, limit, or modify a provider's debt or
22	obligation to repay;
23	(2) Is not a defense to recoupment of Medicaid payments from a
24	provider; and
25	(3) May not serve as the basis for an adverse action against a
26	provider.
27	(e) The Department of Human Services may promulgate rules to
28	administer this section.
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31	APPROVED: 04/08/2015
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