Regular Session, 2014

HOUSE BILL NO. 814

BY REPRESENTATIVE JAMES

MEDICAID: Extends right of Medicaid recovery in cases of third party liability for injury, illness, or death to Medicaid managed care organizations that provide covered services to Medicaid enrollees

1	AN ACT
2	To amend and reenact R.S. 46:446, relative to recovery of assistance and medical payments
3	made by medical assistance programs; to provide for definitions; to confer upon
4	Medicaid managed care organizations certain rights of recovery; to provide relative
5	to notice, pleadings, compromise, and prescription in cases of third party liability for
6	injury, illness, or death; and to provide for related matters.
7	Be it enacted by the Legislature of Louisiana:
8	Section 1. R.S. 46:446 is hereby amended and reenacted to read as follows:
9	§446. Recovery of assistance and medical payments; notice; pleadings;
10	compromise; prescription; privilege for reimbursement of Medicaid
11	payments
12	A. As used in this Section, the following terms have the meaning ascribed
13	in this Subsection:
14	(1) "Department" means the Department of Health and Hospitals.
15	(2) "Medicaid" means the medical assistance program provided for in Title
16	XIX of the Social Security Act.
17	(3) "Medicaid managed care organization" means any private entity that
18	contracts with the department to provide Medicaid benefits and services to enrollees
19	of the Medicaid program.

CODING: Words in struck through type are deletions from existing law; words <u>underscored</u> are additions.

1 A. B. When an injury has been sustained or an illness or death incurred by 2 any person under circumstances creating in some third person or legal entity a legal 3 liability or obligation to pay damages or compensation to that person or to his 4 spouse, representative, or dependent, the Department of Health and Hospitals 5 department, a Medicaid managed care organization, or both shall have a cause of action against such third party and/or and may intervene in a suit filed by or on 6 7 behalf of the injured, ill, or deceased person or his spouse, representative, or 8 dependent against such third party to recover the assistance payments and medical 9 expenses the Department of Health and Hospitals department, Medicaid managed 10 care organization, or each has paid or is obligated to pay on behalf of the injured, ill, 11 or deceased person in connection with said injury, illness, or death. 12 B. C. Any person or his spouse, representative, or dependent who files suit 13 for the recovery of damages or compensation as the result of an injury, illness, or 14 death for which assistance payments of medical expenses in whole or in part have 15 been paid by the Department of Health and Hospitals department, a Medicaid 16 managed care organization, or both, for which the department, Medicaid managed 17 care organization, or each has an obligation to pay therefor, shall at the time suit is 18 filed cause a copy of the petition to be served on the department, Medicaid managed 19 care organization, or both, in the manner prescribed by Article 1313 of the Louisiana 20 Code of Civil Procedure. Such person filing suit shall be responsible to the 21 department, Medicaid managed care organization, or both to the extent of the 22 medical payments or assistance received, interest, and attorney fees if he fails to have 23 service made upon the department, Medicaid managed care organization, or both. 24 Such person shall also be responsible to the department, Medicaid managed care 25 organization, or both if he compromises his claim without giving the department, 26 Medicaid managed care organization, or both written notice at least thirty days 27 before the compromise is affected. This written notice shall include the name and 28 date of birth of all injured or ill recipients and the name and address of the party or 29 parties potentially liable for damages or compensation.

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1	C. D. Pleadings filed on behalf of the Department of Health and Hospitals
2	department or Medicaid managed care organization shall be accompanied by an
3	itemized statement of its monetary claim, and when accompanied by an affidavit to
4	the correctness thereof to the best of the affiant's knowledge and belief, such
5	itemized statement shall be accepted as prima facie proof of the amount, purpose,
6	and necessity of such payments.
7	$\overline{\mathbf{D}}$. $\underline{\mathbf{E}}$. No compromise of any claim referred to in Subsections A and B B and
8	\underline{C} of this Section shall be binding upon or affect the rights of the $\underline{Department of}$
9	Health and Hospitals department or a Medicaid managed care organization against
10	a third party if the department or Medicaid managed care organization has notified
11	such third party in writing of the amount of its claim prior to the date the
12	compromise settlement is made. The notice provided for herein may be directed to
13	either the third party or his agent.
14	E. F. An intervention filed by the Department of Health and Hospitals
15	department or a Medicaid managed care organization as provided by Subsection A
15 16	$\frac{\text{department or a Medicaid managed care organization}}{\underline{B} \text{ of this Section is not barred by prescription if it was not barred at the time the}}$
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16 17 18 19 20 21 22 23	 <u>B</u> of this Section is not barred by prescription if it was not barred at the time the main demand was filed, provided such intervention is filed within ninety days of date of service of main demand upon the department. <u>F: G.</u> The Department of Health and Hospitals department and a Medicaid managed care organization shall have a privilege for the medical assistance payments made by the department <u>or Medicaid managed care organization</u> on behalf of an injured or ill Medicaid recipient on the amount payable to the injured recipient, his heirs, or legal representatives out of the total amount of any recovery or sum had,
 16 17 18 19 20 21 22 23 24 	 <u>B</u> of this Section is not barred by prescription if it was not barred at the time the main demand was filed, provided such intervention is filed within ninety days of date of service of main demand upon the department. F: <u>G</u>. The Department of Health and Hospitals department and a Medicaid managed care organization shall have a privilege for the medical assistance payments made by the department <u>or Medicaid managed care organization</u> on behalf of an injured or ill Medicaid recipient on the amount payable to the injured recipient, his heirs, or legal representatives out of the total amount of any recovery or sum had, collected, or to be collected, whether by judgment or by settlement or compromise,
 16 17 18 19 20 21 22 23 24 25 	 <u>B</u> of this Section is not barred by prescription if it was not barred at the time the main demand was filed, provided such intervention is filed within ninety days of date of service of main demand upon the department. F: G. The Department of Health and Hospitals department and a Medicaid managed care organization shall have a privilege for the medical assistance payments made by the department or Medicaid managed care organization on behalf of an injured or ill Medicaid recipient on the amount payable to the injured recipient, his heirs, or legal representatives out of the total amount of any recovery or sum had, collected, or to be collected, whether by judgment or by settlement or compromise, from another person on account of such injuries, and on the amount payable by any

1	G. H. The privilege created herein shall become effective if, prior to the
2	payment of insurance proceeds, or to the payment of any judgment, settlement, or
3	compromise on account of injuries, a written notice containing the name and address
4	of the injured person, and if known, the name of the person alleged to be liable to the
5	injured person on account of the injuries received, is mailed by the Department of
6	Health and Hospitals department, a Medicaid managed care organization, or its an
7	attorney or agent of either, by certified mail, return receipt requested, to the injured
8	person, to his attorney, to the person alleged to be liable to the injured person on
9	account of the injuries sustained, to any insurance carrier which has insured such
10	person against liability, and to any insurance company obligated by contract to pay
11	indemnity or compensation to the injured person. This privilege shall be effective
12	against the persons given notice according to the provisions hereof, and shall not be
13	defeated nor rendered ineffective as against the persons who have been given such
14	notice, because of failure to give such notice to other persons named herein.
15	H. I. Any insurer, potentially liable third party, or other person who, having
16	received notice in accordance with the provisions hereof, pays over any monies

received notice in accordance with the provisions hereof, pays over any monies subject to the privilege created herein to any injured person, or to the attorney, heirs, or legal representatives of any injured person, and any injured person, his legal representative, or attorney who receives monies subject to the privilege herein shall be liable to the Department of Health and Hospitals department, Medicaid managed care organization, or both for the amount of the privilege not to exceed the amount paid by the insurer, potentially liable third party, or other person.

E.J. Nothing in this Section shall be construed to create any statutory lien or
 privilege on any life insurance proceeds or trust proceeds in favor of any third
 person.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

James

HB No. 814

Abstract: Extends right of Medicaid recovery in cases of third party liability for injury, illness, or death to Medicaid managed care organizations that contract with the Dept. of Health and Hospitals to provide covered services to Medicaid enrollees.

<u>Present law</u> provides that in cases of injury, illness, or death that create third party liability or obligate third party payment of damages, the Department of Health and Hospitals (DHH) shall have a cause of action against such third party to recover Medicaid assistance obligated or paid on behalf of the injured, ill, or deceased person in connection with the injury, illness, or death. Provides for notice, pleadings, compromise, and prescription in such recovery cases.

<u>Proposed law</u> retains <u>present law</u> and extends the right of Medicaid recovery conferred therein upon DHH to Medicaid managed care organizations.

<u>Proposed law</u> defines "Medicaid managed care organization" as any private entity that contracts with DHH to provide Medicaid benefits and services to Medicaid enrollees.

(Amends R.S. 46:446)