MAINE STATE LEGISLATURE

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119th MAINE LEGISLATURE

FIRST REGULAR SESSION-1999

H.P. 1176

House of Representatives, March 4, 1999

An Act Relating to Medicaid Liens.

Reference to the Committee on Health and Human Services suggested and ordered printed.

GOSEPH W. MAYO, Clerk

Presented by Representative THOMPSON of Naples.

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

Sec. 1. 22 MRSA §14, sub-§1, as amended by PL 1997, c. 795, §1, is further amended to read:

1. Recovery procedures. When benefits are provided or will provided to a beneficiary under the Medicaid program administered by the department pursuant to the United States Social Security Act, Title XIX, or under the Maine Health Program, section 3189, for the medical costs of injury, disease, disability or similar occurrence for which a 3rd party is, or may be, liable, the commissioner may recover from that party the reasonable value of the benefits provided. This right of recovery is separate and independent from any rights or causes of action belonging to a beneficiary under the Medicaid program or under the Maine Health Program. For Medicaid recipients who participated in the Medicaid managed care program, "reasonable value" means the total value of coverable medical services provided measured by the amount that Medicaid would have paid to providers directly for such services, were it not for the managed care system. The Medicaid program and Maine Health Program are the payors of last resort and should provide medical coverage only when there are no other available resources. The Attorney General, or counsel appointed by the Attorney General, may, to enforce this right, institute and prosecute legal proceedings directly against the 3rd party in the appropriate court in the name of the commissioner.

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In addition to the right of recovery set forth in this subsection, the commissioner must also be subrogated, to the extent of any benefits provided under the Medicaid program or under the Maine Health Program, to any cause of action or claim that a beneficiary has against a 3rd party who is or may be liable for medical costs incurred by or on behalf of the beneficiary. The Attorney General, or counsel appointed by the Attorney General, to enforce this right may institute prosecute legal proceedings in the name of the injured person, beneficiary, guardian, personal representative, estate survivor. If necessary to enforce the commissioner's right of recovery, the Attorney General, or counsel appointed by the Attorney General, may institute legal proceedings against any beneficiary who has received a settlement or award from a 3rd party.

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The commissioner's right to recover the reasonable value of benefits provided constitutes a statutory lien on the proceeds of an award or settlement from a 3rd party, whether that award or settlement from a 3rd party, whether that award or settlement is or intended to include compensation for medical costs was or could have been included in the recipient's claim for damages from the 3rd

The commissioner is entitled to recover the full amount 2 of the benefits actually paid out or, with regard to Medicaid recipients who participated in the managed care program when the commissioner has determined that collection will be cost-effective, the reasonable value of benefits provided to the extent that there are proceeds available for such recovery after the deduction of reasonable attorney's fees and litigation costs from the gross award or settlement. 8 In determining whether collection will be cost-effective, the commissioner shall 10 consider all factors that diminish potential recovery by the department, including but not limited to questions of liability 12 and comparative negligence or other legal defenses, exigencies of trial that reduce a settlement or award in order to resolve the 14 recipient's claim and limits on the amount of applicable insurance coverage that reduce the claim to the amount recoverable by the recipient. The department's statutory lien 16 may not be reduced to reflect an assessment of a pro rata share 18 of the recipient's attorney's fees or litigation costs. commissioner may compromise, or settle and execute a release of, any claim or waive any claim, in whole or in part, if the 20 commissioner determines the collection will not be cost-effective 22 or that the best possible outcome requires compromise, release or settlement.

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Sec. 2. 22 MRSA §14, sub-§2-F, as amended by PL 1997, c. 795, §2, is further amended to read:

Disbursement. A disbursement of any award, judgment settlement may not be made to a recipient without the recipient or the recipient's attorney first paying to department the amount of the statutory lien from the award, judgment or settlement or obtaining from the department a release of any obligation owed to it for medical benefits provided to the recipient. If a dispute arises between the recipient and the commissioner as to the settlement of any claim that the commissioner may have under this section, the 3rd party or the recipient's attorney shall withhold from disbursement to the recipient an amount equal to the commissioner's claim. Either party may apply to the Superior Court or the District Court in which an action based upon the recipient's claim could have been commenced for an order to determine a reasonable amount in satisfaction of the statutory lien considering whether an independent action by the commissioner would have been cost-effective.

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SUMMARY

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This bill allows the compromise, release or settlement of Medicaid-related claims when the commissioner determines that the best possible outcome requires compromise, release or settlement.