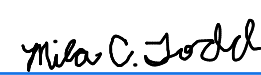




Section: <b>Compliance</b>	Policy Name: <b>60-day Requirement for Reporting and Returning of Overpayments</b>	Policy Number: <b>10.22</b>
Owner: <b>Chief Compliance Officer</b>	Reviewed By: <b>Mila C. Todd</b>	Total Pages: <b>3</b>
Required By: <input checked="" type="checkbox"/> BBA <input checked="" type="checkbox"/> MDHHS <input type="checkbox"/> NCQA <input type="checkbox"/> Other (please specify): <u>42 CFR §401.301 – §401.305</u>	Final Approval By:  <u>Mila Todd (Mar 31, 2023 05:12 EDT)</u>	Date Approved:  Mar 31, 2023
Application: <input checked="" type="checkbox"/> SWMBH Staff/Ops <input checked="" type="checkbox"/> Participant CMHSPs <input checked="" type="checkbox"/> SUD Providers <input checked="" type="checkbox"/> MH/IDD Providers <input checked="" type="checkbox"/> Other (please specify): <u>MI Health Link</u>	Line of Business: <input checked="" type="checkbox"/> Medicaid <input type="checkbox"/> Other (please specify): <input checked="" type="checkbox"/> Healthy Michigan                      _____ <input checked="" type="checkbox"/> SUD Block Grant <input checked="" type="checkbox"/> SUD Medicaid <input checked="" type="checkbox"/> MI Health Link	Effective Date: <b>04/13/2016</b>

**Policy:** A person that has received an overpayment must report, in writing, the reason for the overpayment, and return the overpayment to Southwest Michigan Behavioral Health (SWMBH) within sixty (60) days after the date on which the overpayment was identified. The sixty (60) day requirement applies unless the deadline for returning overpayments is suspended under an applicable law or regulation.

**Purpose:** The purpose of this Policy is to ensure overpayments to providers and suppliers of services under Parts A and B of title XVIII of the Social Security Act are reported and returned in a timely manner and in accordance with applicable laws and regulations.

**Scope:** SWMBH and its provider network

**Responsibilities:** SWMBH and its entire provider network are required to report and return overpayments within 60 days of identification of the overpayment.

**Definitions:**

- A. **Overpayment** means any funds that a person has received or retained under title XVIII of the Social Security Act, to which the person is not entitled under such title.
- B. **Person** means a provider (as defined in 42 CFR §400.202) or a supplier (as defined in 42 CFR §400.202).

**Standards and Guidelines:**

- A. A person has identified an overpayment when the person has, or should have through the exercise of reasonable diligence, determined that the person has received an overpayment and quantified the amount of the overpayment. A person should have determined that the



person received an overpayment and quantified the amount of the overpayment if the person fails to exercise reasonable diligence and the person in fact received an overpayment.

- B. A person must use an applicable claims adjustment, credit balance, self-reported refund, or other reporting process to report an overpayment, except as otherwise allowed by applicable laws and regulations. If the person calculates the overpayment amount using a statistical sampling methodology, the person must describe the statistically valid sampling and extrapolation methodology in the report.
- C. An overpayment must be reported and returned in accordance with this policy if a person identifies the overpayment within six (6) years of the date the overpayment was received.
- D. This policy applies to Medicare program funds. For information regarding the reporting and returning of overpayments of Medicaid funds, see SWMBH Operating Policy 09.02.

**References:**

- A. 42 CFR §400.202
- B. 42 CFR §401.301 – §401.305
- C. Social Security Act
- D. SWMBH Operating Policy 09.02

**Attachments:** None.



# 10.22 60-Day Rule for Reporting and Returning of Overpayments

Final Audit Report

2023-03-31

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