As Introduced

136th General Assembly Regular Session 2025-2026

S. B. No. 162

Senator Blessing

г	o amend section	3901.388 of th	ne Revised Code	1
	regarding the	timeframe for	health insurer	2
	recoupment fr	om health care	providers.	3

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

Section 1. That section 3901.388 of the Revised Code be	4		
amended to read as follows:			
Sec. 3901.388. (A) (1) A payment made by a third-party	6		
payer to a provider in accordance with sections 3901.381 to	7		
3901.386 of the Revised Code shall be considered final $\frac{1}{1000}$ years			
after upon the conclusion of a time period, beginning on the	9		
date payment is made and ending on the date that occurs after	10		
the same number of days the health plan issuer grants for the			
filing of provider claims. After that date, the amount of the			
payment is not subject to adjustment, except in the case of			
fraud by the provider.			
(2) No third-party payer shall change its payment, audit,	15		
or review timelines during the contract period.	16		
(B) A third-party payer may recover the amount of any part	17		
of a payment that the third-party payer determines to be an			
overpayment if the recovery process is initiated not later than			
two years after the payment was made to the providerwithin the			

period of time described in division (A) (1) of this section. The 21 third-party payer shall inform the provider of its determination 22 of overpayment by providing notice in accordance with division 23 (C) of this section. The third-party payer shall give the 24 provider an opportunity to appeal the determination and shall 25 not charge the provider a fee for an appeal. If the provider 26 27 fails to respond to the notice sooner than thirty days after the notice is made, elects not to appeal the determination, or 28 appeals the determination but the appeal is not upheld, the 29 third-party payer may initiate recovery of the overpayment. 30

When a provider has failed to make a timely response to 31 the notice of the third-party payer's determination of 32 overpayment, the third-party payer may recover the overpayment 33 by deducting the amount of the overpayment from other payments 34 the third-party payer owes the provider or by taking action 35 pursuant to any other remedy available under the Revised Code. 36 When a provider elects not to appeal a determination of 37 overpayment or appeals the determination but the appeal is not 38 upheld, the third-party payer shall permit a provider to repay 39 the amount by making one or more direct payments to the third-40 party payer or by having the amount deducted from other payments 41 the third-party payer owes the provider. 42

(C) The notice of overpayment a third-party payer is
required to give a provider under division (B) of this section
shall be made in writing and shall specify all of the following:

(1) The full name of the beneficiary who received the46health care services for which overpayment was made;47

(2) The date or dates the services were provided; 48

(3) The amount of the overpayment;

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(4) The claim number or other pertinent numbers; 50 (5) A detailed explanation of basis for the third-party 51 payer's determination of overpayment; 52 (6) The method in which payment was made, including, for 53 tracking purposes, the date of payment and, if applicable, the 54 check number; 55 (7) That the provider may appeal the third-party payer's 56 determination of overpayment, if the provider responds to the 57 notice within thirty days; 58 (8) The method by which recovery of the overpayment would 59 be made, if recovery proceeds under division (B) of this 60 section. 61 (D) Any provision of a contractual arrangement entered 62 into between a third-party payer and a provider or beneficiary 63 that is contrary to divisions (A) to (C) of this section is 64 unenforceable. 65 Section 2. That existing section 3901.388 of the Revised 66 Code is hereby repealed. 67