

## 42 U.S. Code § 1395h

## Provisions relating to the administration of part A

## (a) In general

The administration of this part shall be conducted through contracts with medicare administrative contractors under section 1395kk-1 of this title.

- (b) Repealed. Pub. L. 108–173, title IX, § 911(b)(3), Dec. 8, 2003, 117 Stat. 2383
- (c) Prompt payment of claims
- (1) Repealed. Pub. L. 108-173, title IX, § 911(b)(4)(A), Dec. 8, 2003, 117 Stat. 2383.

(2)

- (A) Each contract under section 1395kk-1 of this title that provides for making payments under this part shall provide that payment shall be issued, mailed, or otherwise transmitted with respect to not less than 95 percent of all claims submitted under this subchapter—
  - (i) which are clean claims, and
- (ii) for which payment is not made on a periodic interim payment basis, within the applicable number of calendar days after the date on which the claim is received.
- (B) In this paragraph:
  - (i) The term "clean claim" means a claim that has no defect or impropriety (including any lack of any required substantiating documentation) or particular circumstance requiring special treatment that prevents timely payment from being made on the claim under this subchapter.
  - (ii) The term "applicable number of calendar days" means—
    - (I) with respect to claims received in the 12-month period beginning October 1, 1986, 30 calendar days,
    - (II) with respect to claims received in the 12-month period beginning October 1, 1987, 26 calendar days,
    - (III) with respect to claims received in the 12-month period beginning October 1, 1988, 25 calendar days,
    - (IV) with respect to claims received in the 12-month period beginning October 1, 1989, and claims received in any succeeding 12-month period ending on or before September 30, 1993, 24 calendar days, and
    - (V) with respect to claims received in the 12-month period beginning October 1, 1993, and claims received in any succeeding 12-month period, 30 calendar days.
- (C) If payment is not issued, mailed, or otherwise transmitted within the applicable number of calendar days (as defined in clause (ii) of subparagraph (B)) after a clean claim (as defined in clause (i) of such subparagraph) is received from a hospital, critical access hospital, skilled nursing facility, home health agency, hospice program, comprehensive outpatient rehabilitation facility, or rehabilitation agency that is not receiving payments on a periodic interim payment basis with respect to such services, interest shall be paid at the rate used for purposes of section 3902(a) of title 31(relating to interest penalties for failure to

make prompt payments) for the period beginning on the day after the required payment date and ending on the date on which payment is made. This document is only available to subscribers. Please  $\log$  in or purchase access. Purchase Login Copyright © 2024 by Society of Corporate Compliance and Ethics (SCCE) & Health Care Compliance Association (HCCA). No claim to original US