

WAC 388-96-208 Reconciliation of medicaid resident days to billed days and medicaid payments—Payments due—Accrued interest—Withholding funds.

(1) The department must reconcile medicaid resident days to billed days and medicaid payments for each medicaid nursing facility for each calendar year, or for that portion of the calendar year the provider's contract was in effect.

(2) The contractor must make any payment owed the department as determined by either reconciliation or settlement, or both, at the lower of cost or rate within sixty days after the department notifies the contractor of the amount owed.

(3) The department must pay the contractor within sixty days after it notifies the contractor of an underpayment.

(4) Interest at the rate of one percent per month accrues against the department or the contractor on an unpaid balance existing sixty days after notification of the contractor. Accrued interest must be adjusted back to the date it began to accrue if the payment obligation is subsequently revised after administrative or judicial review.

(5) The department may withhold funds from the contractor's payment for services and may take all other actions authorized by law to recover from the contractor amounts due and payable including any accrued interest. Neither a timely filed appeal under WAC 388-96-901 and 388-96-904 nor the commencement of judicial review as may be available to the contractor in law to contest a payment obligation determination shall delay recovery from the contractor or payment to the contractor.

(6) For all cost report periods ending on or before December 31, 2015, the contractor must make payment owed to the department for direct care, therapy, and support services at the lower of the cost or rate.

(7) For all cost report periods beginning January 1, 2016 and ending on or before December 31, 2016, cost in direct care, therapy, and support services must be combined and compared to the combined weighted rates for direct care, therapy, and support services. The contractor must make payment owed to the department for combined direct care, therapy, and support services at the lower of the cost or rate.

(8) For all cost report periods beginning on or after January 1, 2017, the contractor must make payment owed to the department for direct care at the lower of the cost or rate.

[Statutory Authority: RCW 74.46.800, 74.46.561(1). WSR 17-22-037, § 388-96-208, filed 10/24/17, effective 11/24/17. Statutory Authority: Chapter 74.46 RCW, 2010 1st sp.s. c 34, and 2010 1st sp.s. c 37 § 958. WSR 11-05-068, § 388-96-208, filed 2/14/11, effective 2/26/11.]