## Chapter 182-520 WAC FRAUD REFERRALS AND OVERPAYMENTS

WAC

182-520-0005

Washington apple health fraud referrals and overpay-

ments.

182-520-0010

Washington apple health overpayments resulting from an administrative hearing.

WAC 182-520-0005 Washington apple health fraud referrals and overpayments. (1) The agency or its designee may refer a case to the office of fraud and accountability for a fraud investigation when it has reliable information that the person purposely misrepresented their circumstances in order to qualify for Washington apple health (WAH).

- (2) When a fraud investigation reveals substantial evidence to support a finding of fraud, the case is referred for prosecution. The prosecuting attorney's office decides which cases will be prosecuted.
- (3) When a referral results in a conviction, an overpayment amount for the cost of the WAH coverage is established.
- (4) The person is responsible to pay the agency for the amount of overpayment established as a result of a fraud conviction

[Statutory Authority: RCW 41.05.021, Patient Protection and Affordable Care Act (P.L. 111-148), 42 C.F.R. §§ 431, 435, 457, and 45 C.F.R. § 155. WSR 14-01-021, § 182-520-0005, filed 12/9/13, effective 1/9/14.]

WAC 182-520-0010 Washington apple health overpayments resulting from an administrative hearing. (1) If a person asks for Washington apple health (WAH) coverage to continue during an appeal, he or she must pay the agency for the cost of that coverage if both (a) and (b) of this subsection occur:

- (a) The administrative law judge, or review judge if applicable, enters an order:
- (i) That the person was not eligible for WAH coverage during the appeal;
- (ii) Dismissing the hearing under WAC 182-526-0285 (3) because the person defaulted (did not attend or refused to participate) and the agency's action that was appealed included a finding that the person was not eligible for WAH coverage; or
- (iii) Dismissing the hearing under WAC 182-526-0285(4) due to a written agreement between all the parties that the person will pay for an overpayment of the cost of WAH coverage.
  - (b) The agency decides to collect the overpayment.
- (2) The overpayment amount is limited to payments for WAH coverage that were spent:
- (a) During the sixty days following receipt of the hearing request; and
- (b) For a person who was not eligible for WAH coverage.
- (3) The agency will not attempt to recover a WAH overpayment from a nonneedy caretaker relative or guardian

except in the case of fraud by the caretaker relative or guardian as described in WAC 182-520-0005.

[Statutory Authority: RCW 41.05.021, Patient Protection and Affordable Care Act (P.L. 111-148), 42 C.F.R. §§ 431, 435, 457, and 45 C.F.R. § 155. WSR 14-01-021, § 182-520-0010, filed 12/9/13, effective 1/9/14.]

(12/9/13) [Ch. 182-520 WAC p. 1]