

**[Ind. Code § 12-15-29-4.5.]**

§ 12-15-29-4.5. Time limit for acceptance of Medicaid claims; restrictions on denial of claims: Medicaid -- Insurance

(a) An insurer shall accept a Medicaid claim for a Medicaid recipient for three (3) years from the date the service was provided.

(b) An insurer may not deny a Medicaid claim submitted by the office solely on the basis of:

(1) the date of submission of the claim;

(2) the type or format of the claim form;

(3) the method of submission of the claim; or

(4) a failure to provide proper documentation at the point of sale that is the basis of the claim;

if the claim is submitted by the office within three (3) years from the date the service was provided as required in subsection (a) and the office commences action to enforce the office's rights regarding the claim within six (6) years of the office's submission of the claim.

(c) An insurer may not deny a Medicaid claim submitted by the office solely due to a lack of prior authorization. An insurer shall conduct the prior authorization on a retrospective basis for claims where prior authorization is necessary and adjudicate any claim authorized in this manner as if the claim received prior authorization.