



General Assembly

February Session, 2026

Raised Bill No. 341

LCO No. 2246



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by:
(INS)

AN ACT CONCERNING RETURN OF HEALTH CARE PROVIDER PAYMENTS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (c) of section 38a-479b of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective January*
3 *1, 2027*):

4 (c) (1) No contracting health organization shall cancel, deny or
5 demand the return of full or partial payment for an authorized covered
6 service due to administrative or eligibility error, more than [eighteen]
7 twelve months after the date of the receipt of a clean claim, except if:

8 (A) Such organization has a documented basis to believe that such
9 claim was submitted fraudulently by such provider;

10 (B) The provider did not bill appropriately for such claim based on
11 the documentation or evidence of what medical service was actually
12 provided;

13 (C) Such organization has paid the provider for such claim more than

14 once;

15 (D) Such organization paid a claim that should have been or was paid
16 by a federal or state program; or

17 (E) The provider received payment for such claim from a different
18 insurer, payor or administrator through coordination of benefits or
19 subrogation, or due to coverage under an automobile insurance or
20 workers' compensation policy. Such provider shall have one year after
21 the date of the cancellation, denial or return of full or partial payment to
22 resubmit an adjusted secondary payor claim with such organization on
23 a secondary payor basis, regardless of such organization's timely filing
24 requirements.

25 (2) (A) Such organization shall give at least thirty days' advance
26 notice to a provider by certified mail, return receipt requested, electronic
27 mail to such electronic mail address designated by such provider or
28 facsimile of the organization's cancellation, denial or demand for the
29 return of full or partial payment pursuant to subdivision (1) of this
30 subsection.

31 (B) If such organization demands the return of full or partial payment
32 from a provider, the notice required under subparagraph (A) of this
33 subdivision shall disclose to the provider (i) the amount that is
34 demanded to be returned, (ii) the claim that is the subject of such
35 demand, and (iii) the basis on which such return is being demanded.

36 (C) Not later than thirty days after the receipt of the notice required
37 under subparagraph (A) of this subdivision, a provider may appeal such
38 cancellation, denial or demand in accordance with the procedures
39 provided by such organization. If any such organization fails to notify
40 the provider of such organization's determination on such appeal not
41 later than fifteen business days after receipt of such appeal from such
42 provider, such appeal shall be construed in favor of such provider. Any
43 demand for the return of full or partial payment shall be stayed during
44 the pendency of such appeal.

45 (D) If there is no appeal or an appeal is denied, such provider may
46 resubmit an adjusted claim, if applicable, to such organization, not later
47 than thirty days after the receipt of the notice required under
48 subparagraph (A) of this subdivision or the denial of the appeal,
49 whichever is applicable, except that if a return of payment was
50 demanded pursuant to subparagraph (C) of subdivision (1) of this
51 subsection, such claim shall not be resubmitted.

52 (E) A provider shall have one year after the date of the written notice
53 set forth in subparagraph (A) of this subdivision to identify any other
54 appropriate insurance coverage applicable on the date of service and to
55 file a claim with such insurer, health care center or other issuing entity,
56 regardless of such insurer's, health care center's or other issuing entity's
57 timely filing requirements.

This act shall take effect as follows and shall amend the following sections:		
Section 1	January 1, 2027	38a-479b(c)

INS *Joint Favorable*