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Revisions: 11/07/2019, 3/25/2022

**Document Scope:** (applies to Policy & Procedure only)

- The requirements herein apply only to the GCBH BH-ASO Office and its functions.
  - The requirements herein apply, verbatim, to GCBH BH-ASO and its network providers<sup>2</sup>.
  - The requirements herein apply both to GCBH BH-ASO and its network providers<sup>2</sup>. Additionally, network providers must have internal documents outlining their processes for implementing the requirements, insofar as they relate to actions for which network providers are responsible.
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**PURPOSE:** To outline how Greater Columbia Behavioral Health, LLC BH-ASO (GCBH BH-ASO) overpayments to providers are reported and handled.

**DEFINITIONS**

Overpayment means any payment from GCBH BH-ASO to the Contractor in excess of that to which the Contractor is entitled by law, rule, or Contract, including amounts in dispute. Overpayment can also mean a payment from the GCBH BH-ASO to a Contractor or Subcontractor to which the Contractor or Subcontractor is not legally entitled. RCW 41.05A.010.

**POLICY**

- A. Greater Columbia Behavioral Health, LLC (GCBH BH-ASO) requires a provider network to report to GCBH BH-ASO when it has received an overpayment within 60 calendar days after the date on which overpayment was identified, and to notify GCBH BH-ASO in writing of the reason for the overpayment.

**PROCEDURE**

1. Treatment of recoveries made by MCO, PIHP, or PAHP must specify:
  - (i) The retention policies for the treatment of recoveries of all overpayments from the MCO, PIHP, or PAHP to a provider, including specifically the retention policies for the treatment of recoveries of overpayments due to fraud, waste and abuse.
  - (ii) The process, timeframes, and documentation requires for reporting and recovering all overpayments.
  - (iii) The process, timeframes, and documentation required for payment of recoveries of overpayments to the State in situations where the MCO, PIHP, or PAHP is not permitted to retain some or all of the recoveries of overpayments.
  - (iv) This provision does not apply to any amount of recovery to be retained under False Claims Act cases or through other investigations.
2. Each MCO, PIHP, or PAHP requires and has a mechanism for a network provider to report to the MCO, PIHP, or PAHP when it has received an overpayment, to return the overpayment to the MCO, PIHP, or PAHP within 60 calendar days after the date on

<sup>1</sup>See definitions of document types in AD100, "Development, Approval & Review of Formal GCBH BH-ASO Documents"

<sup>2</sup>"Network Provider" – An organization with which GCBH BH-ASO is contracted for the provision of direct services.

which the overpayment was identified, and to notify the MCO, PIHP, or PAHP in writing of the reason for the overpayment.

- (i) Each MCO, PIHP, or PAHP must report annually to the GCBH BH-ASO on their recoveries of overpayments.

**APPROVAL**

  
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Karen Richardson or Sindi Saunders, Co-Directors

  
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Date