### SECOND REGULAR SESSION

#### SENATE COMMITTEE SUBSTITUTE FOR

# SENATE BILLS NOS. 1210, 1244 & 844

## 93RD GENERAL ASSEMBLY

Reported from the Committee on Pensions, Veterans' Affairs and General Laws, April 3, 2006, with recommendation that the Senate Committee Substitute do pass.

5340S.03C

TERRY L. SPIELER, Secretary.

## AN ACT

To repeal sections 191.900, 191.905, and 191.910, RSMo, and to enact in lieu thereof seven new sections relating to Medicaid fraud, with penalty provisions.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Sections 191.900, 191.905, and 191.910, RSMo, are repealed

- 2 and seven new sections enacted in lieu thereof, to be known as sections 191.900,
- 3 191.905, 191.907, 191.908, 191.909, 191.910, and 191.914, to read as follows:

191.900. As used in sections 191.900 to 191.910, the following terms

- 2 mean:
- 3 (1) "Abuse", the infliction of physical, sexual or emotional harm or
- 4 injury. "Abuse" includes the taking, obtaining, using, transferring, concealing,
- 5 appropriating or taking possession of property of another person without such
- 6 person's consent;
- 7 (2) "Claim", any attempt to cause a health care payer to make a health
- 8 care payment;
- 9 (3) "False", wholly or partially untrue. A false statement or false
- 10 representation of a material fact means the failure to reveal material facts in a
- 11 manner which is intended to deceive a health care payer with respect to a claim;
- 12 (4) "Health care", any service, assistance, care, product, device or thing
- 13 provided pursuant to a medical assistance program, or for which payment is
- 14 requested or received, in whole or part, pursuant to a medical assistance
- 15 program;
- 16 (5) "Health care payer", a medical assistance program, or any person

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

- 17 reviewing, adjusting, approving or otherwise handling claims for health care on
- 18 behalf of or in connection with a medical assistance program;
- 19 (6) "Health care payment", a payment made, or the right under a medical
- 20 assistance program to have a payment made, by a health care payer for a health
- 21 care service;
- 22 (7) "Health care provider", any person delivering, or purporting to deliver,
- 23 any health care, and including any employee, agent or other representative of
- 24 such a person;
- 25 (8) "Knowing" and "knowingly", that a person, with respect to
- 26 information:
- 27 (a) Has actual knowledge of the information;
- 28 (b) Acts in deliberate ignorance of the truth or falsity of the
- 29 information; or
- 30 (c) Acts in reckless disregard of the truth or falsity of the
- 31 information;
- 32 (9) "Medical assistance program", any program to provide or finance
- 33 health care to recipients which is established pursuant to title 42 of the United
- 34 States Code, any successor federal health insurance program, or a waiver granted
- 35 thereunder. A medical assistance program may be funded either solely by state
- 36 funds or by state and federal funds jointly. The term "medical assistance
- 37 program" shall include the medical assistance program provided by section
- 38 208.151, RSMo, et seq., and any state agency or agencies administering all or any
- 39 part of such a program;
- 40 [(9)] (10) "Person", a natural person, corporation, partnership,
- 41 association or any legal entity.
  - 191.905. 1. No health care provider shall knowingly make or cause to be
  - 2 made a false statement or false representation of a material fact in order to
- 3 receive a health care payment, including but not limited to:
- 4 (1) Knowingly presenting to a health care payer a claim for a health care
- 5 payment that falsely represents that the health care for which the health care
- 6 payment is claimed was medically necessary, if in fact it was not;
- 7 (2) Knowingly concealing the occurrence of any event affecting an initial
- 8 or continued right under a medical assistance program to have a health care
- 9 payment made by a health care payer for providing health care;
- 10 (3) Knowingly concealing or failing to disclose any information with the
- 11 intent to obtain a health care payment to which the health care provider or any

1617

23

2425

26

2728

34

35

36

37

38

39 40

41

42 43

44

45

46 47

other health care provider is not entitled, or to obtain a health care payment in an amount greater than that which the health care provider or any other health care provider is entitled;

- (4) Knowingly presenting a claim to a health care payer that falsely indicates that any particular health care was provided to a person or persons, if in fact health care of lesser value than that described in the claim was provided.
- 2. No person shall knowingly solicit or receive any remuneration, including any kickback, bribe, or rebate, directly or indirectly, overtly or covertly, in cash or in kind in return for:
- 21 (1) Referring another person to a health care provider for the furnishing 22 or arranging for the furnishing of any health care; or
  - (2) Purchasing, leasing, ordering or arranging for or recommending purchasing, leasing or ordering any health care.
  - 3. No person shall knowingly offer or pay any remuneration, including any kickback, bribe, or rebate, directly or indirectly, overtly or covertly, in cash or in kind, to any person to induce such person to refer another person to a health care provider for the furnishing or arranging for the furnishing of any health care.
- 4. Subsections 2 and 3 of this section shall not apply to a discount or other reduction in price obtained by a health care provider if the reduction in price is properly disclosed and appropriately reflected in the claim made by the health care provider to the health care payer, or any amount paid by an employer to an employee for employment in the provision of health care.
  - 5. Exceptions to the provisions of subsections 2 and 3 of this subsection shall be provided for as authorized in 42 U.S.C. Section 1320a-7b(3)(E), as may be from time to time amended, and regulations promulgated pursuant thereto.
    - 6. No person shall knowingly abuse a person receiving health care.
  - 7. A person who violates subsections 1 to 4 of this section is guilty of a class [D] C felony upon his or her first conviction, and shall be guilty of a class [C] B felony upon his or her second and subsequent convictions, and any natural person who has been convicted of such violations forever shall be excluded from participation as a provider for the medical assistance program. A prior conviction shall be pleaded and proven as provided by section 558.021, RSMo. A person who violates subsection 6 of this section shall be guilty of a class C felony, unless the act involves no physical, sexual or emotional harm or injury and the value of the property involved is less than five hundred dollars, in which event a violation of subsection 6 of this section is a class A

54

55

56

57

58

76

77

79 80

81

82

misdemeanor. No person convicted of a violation of subsections 1 to 4 of this section shall be eligible for parole, probation, conditional release, or suspended imposition or execution of sentence until he or she has served at least eighty-five percent of any term of imprisonment ordered as punishment.

- 8. Any natural person who willfully prevents, obstructs, misleads, delays, or attempts to prevent, obstruct, mislead, or delay the communication of information or records relating to a violation of sections 191.900 to 191.910 shall be guilty of a class D felony, and forever shall be excluded from participation as a provider for the medical assistance program.
- [8.] 9. Each separate false statement or false representation of a material fact proscribed by subsection 1 of this section or act proscribed by subsection 2 or 3 of this section shall constitute a separate offense and a separate violation of this section, whether or not made at the same or different times, as part of the same or separate episodes, as part of the same scheme or course of conduct, or as part of the same claim.
- [9.] 10. In a prosecution pursuant to subsection 1 of this section, circumstantial evidence may be presented to demonstrate that a false statement or claim was knowingly made. Such evidence of knowledge may include but shall not be limited to the following:
- 69 (1) A claim for a health care payment submitted with the health care 70 provider's actual, facsimile, stamped, typewritten or similar signature on the 71 claim for health care payment;
- 72 (2) A claim for a health care payment submitted by means of computer 73 billing tapes or other electronic means;
- 74 (3) A course of conduct involving other false claims submitted to this or 75 any other health care payer.
  - [10.] 11. Any person convicted of a violation of this section, in addition to any fines, penalties or sentences imposed by law, shall be required to make restitution to the federal and state governments, in an amount at least equal to that unlawfully paid to or by the person, and shall be required to reimburse the reasonable costs attributable to the investigation and prosecution pursuant to sections 191.900 to 191.910. All of such restitution shall be paid and deposited to the credit of the "Medicaid Fraud Reimbursement Fund", which is hereby established in the state treasury. Moneys in the Medicaid fraud reimbursement

8687

88 89

90

91

92

9394

95

9697

98

99 100

101102

103

104

105

106

107

108109

110

111112

113

114115

116

119

fund shall be divided and appropriated to the federal government and affected state agencies in order to refund moneys falsely obtained from the federal and state governments. All of such cost reimbursements attributable to the investigation and prosecution shall be paid and deposited to the credit of the "Medicaid Fraud Prosecution Revolving Fund", which is hereby established in the state treasury. Moneys in the Medicaid fraud prosecution revolving fund may be appropriated to the attorney general, or to any prosecuting or circuit attorney who has successfully prosecuted an action for a violation of sections 191,900 to 191.910 and been awarded such costs of prosecution, in order to defray the costs of the attorney general and any such prosecuting or circuit attorney in connection with their duties provided by sections 191.900 to 191.910. No moneys shall be paid into the Medicaid fraud protection revolving fund pursuant to this subsection unless the attorney general or appropriate prosecuting or circuit attorney shall have commenced a prosecution pursuant to this section, and the court finds in its discretion that payment of attorneys' fees and investigative costs is appropriate under all the circumstances, and the attorney general and prosecuting or circuit attorney shall prove to the court those expenses which were reasonable and necessary to the investigation and prosecution of such case, and the court approves such expenses as being reasonable and necessary. The provisions of section 33.080, RSMo, notwithstanding, moneys in the Medicaid fraud prosecution revolving fund shall not lapse at the end of the biennium.

- [11.] 12. A person who violates subsections 1 to 4 of this section shall be liable for a civil penalty of not less than five thousand dollars and not more than ten thousand dollars for each separate act in violation of such subsections, plus three times the amount of damages which the state and federal government sustained because of the act of that person, except that the court may assess not more than two times the amount of damages which the state and federal government sustained because of the act of the person, if the court finds:
- (1) The person committing the violation of this section furnished personnel employed by the attorney general and responsible for investigating violations of sections 191.900 to 191.910 with all information known to such person about the violation within thirty days after the date on which the defendant first obtained the information;
- 117 (2) Such person fully cooperated with any government investigation of 118 such violation; and
  - (3) At the time such person furnished the personnel of the attorney

general with the information about the violation, no criminal prosecution, civil action, or administrative action had commenced with respect to such violation, and the person did not have actual knowledge of the existence of an investigation into such violation.

[12.] 13. Upon conviction pursuant to this section, the prosecution authority shall provide written notification of the conviction to all regulatory or disciplinary agencies with authority over the conduct of the defendant health care provider.

[13.] 14. The attorney general may bring a civil action against any person who shall receive a health care payment as a result of a false statement or false representation of a material fact made or caused to be made by that person. The person shall be liable for up to double the amount of all payments received by that person based upon the false statement or false representation of a material fact, and the reasonable costs attributable to the prosecution of the civil action. All such restitution shall be paid and deposited to the credit of the Medicaid fraud reimbursement fund, and all such cost reimbursements shall be paid and deposited to the credit of the Medicaid fraud prosecution revolving fund. No reimbursement of such costs attributable to the prosecution of the civil action shall be made or allowed except with the approval of the court having jurisdiction of the civil action. No civil action provided by this subsection shall be brought if restitution and civil penalties provided by subsections 10 and 11 of this section have been previously ordered against the person for the same cause of action.

191.907. 1. Any person may bring a civil action in the name of the state to recover losses that the state suffers from a violation of sections 191.900 to 191.910. In an action brought under this section, a person who violates subsection 1 to 4 of section 191.905 is liable as provided by subsection 11 of section 191.905. The amount of any civil penalty assessed by the court under this section shall be reduced by the amount of any civil monetary penalty which the person establishes that he or she has paid under the laws of the United States for a violation of 31 U.S.C. section 3729, et seq., as long as such violation is based on the same underlying facts upon which the state action was brought. At the time of filing the complaint, the person shall deliver a copy of the complaint and written disclosure of all material evidence and information the person possesses to the state attorney general. The complaint shall be filed in camera, shall remain under seal for at least

24

25

 $^{26}$ 

33

34

35

36

37

38 39

40 41

42

43

44

45

46

47 48

49

50

51

one hundred and twenty days, and shall not be served upon the 15 16 defendant until the court so orders. The attorney general may elect to intervene and proceed with the action within sixty days after it 17receives both the complaint and the material evidence and 18 information. During the period in which the complaint is under seal, 19 the attorney general may elect to initiate discussions with the accused 20 provider in an attempt to facilitate a resolution of the claim prior to 2122 the commencement of judicial proceedings.

- 2. The attorney general may, for good cause shown, move the court for an extension of the time during which the complaint remains under seal, as provided by subsection 1 of this section. Any such motion may be supported by affidavits or other submissions in camera.
- 3. Before the expiration of the one hundred and twenty day period or any extensions obtained under subsection 2 of this section, the attorney general shall:
- 30 (1) Notify the court and the person initiating the action that it 31 will proceed with the action, in which case the action shall be 32 conducted by the attorney general; or
  - (2) Notify the court that it declines to take over the action, in which case the action shall be dismissed, notwithstanding any objection by the person initiating the action.
  - 4. When a person files an action under this section, no person other than the attorney general shall intervene or bring a related action based on the facts underlying the pending action.
  - 5. If the attorney general elects to proceed with the action, he or she shall have the primary responsibility for conducting the action, and shall not be bound by any act of the person initiating the action. Such person shall have the right to continue as a party to the action, subject to the limitations set forth in subsection 8 of this section.
  - 6. The attorney general may voluntarily dismiss the action notwithstanding the objections of the person initiating the action, but only if that person has been notified of and offered the opportunity to participate in a hearing on the motion to dismiss.
  - 7. The attorney general may settle the action, notwithstanding the objections of the person initiating the action, but only if that person has been notified of and offered the opportunity to participate in a hearing on the settlement, and if the court determines that the

58 59

60

61

77

78

79

80

81

82

83

84

85

86

87

88

52settlement is fair, adequate, and reasonable under the circumstances.

- 53 8. Upon a showing by the attorney general that unrestricted participation during the course of the litigation by the person initiating 54the action would interfere with or unduly delay the attorney general's 55prosecution of the case, or would be repetitious, irrelevant, or unduly 56 harassing, the court may, in its discretion, impose limitations on the person's participation, such as:
  - (1) Limiting the number of witnesses the person may call;
  - (2) Limiting the length of the testimony of witnesses;
    - (3) Limiting the person's cross-examination of witnesses; or
- (4) Otherwise limiting the participation by the person in the 62 63 litigation.
- Upon a showing by the defendant that unrestricted participation 64during the course of the litigation by the person initiating the action 6566 would be unduly harassing, or would cause the defendant undue burden or unnecessary expense, the court may limit the participation 67 by the person in the litigation. 68
- 69 9. Upon a showing, conducted in camera, that actions of the 70 person initiating the action during discovery would interfere with the 71attorney general's investigation or prosecution of a criminal or civil 72matter, the court may stay the discovery by the person initiating the 73action for not more than sixty days. The court may extend the stay 74upon a further showing that the attorney general is pursuing the investigation or proceeding with reasonable diligence and the 7576 discovery would interfere with the ongoing investigation or proceeding.
  - 10. As an alternative to an action authorized by this section, the attorney general may pursue a violation of sections 191.900 to 191.910 through any alternate proceeding available to this state. If the attorney general pursues an alternate proceeding, a person who initiated an action under this section shall have equivalent rights in that proceeding to the rights that the person would have had if the action had continued under this section. Findings of fact and conclusions of law that become final in an alternative proceeding shall become conclusive on the parties to an action under this section. For the purposes of this subsection, a finding or conclusion is final if it has been finally determined on appeal to the appropriate court, if the time for filing an appeal with respect to the finding or conclusion has

89 expired, or if the finding or conclusion is not subject to judicial review.

- 11. If the parties to an action filed under this section prevail in the action, the court shall award the person who initiated such action necessary expenses, costs, reasonable attorney fees, and, based on the amount of effort involved, the court shall award such person twenty to thirty-five percent of the monetary proceeds resulting from the action or any settlement of the claim.
- 12. If the court finds an action under this section to be based primarily on disclosure of specific information that was not provided by the person initiating the action, such as information from a criminal, civil, or administrative hearing in a state or federal department or agency, a legislative report, hearing, audit, or investigation, or the news media, and the attorney general proceeds with the action, the court shall award the person initiating the action no more than fifteen percent of the monetary recovery in addition to reasonable attorney's fees, necessary expenses, and costs.
- 13. If the court finds that the person initiating an action under this section planned, initiated, or participated in the conduct upon which the action is brought, the court may reduce or eliminate, as it considers appropriate, the share of the proceeds of the action that the person would otherwise be entitled to receive. A person who is convicted of criminal conduct arising from a violation of sections 191.900 to 191.910 shall not initiate or remain a party to an action under this section and is not entitled to share in the monetary proceeds resulting from the action or any settlement under this section.
- 14. A person other than the attorney general shall not bring an action under this section that is based on allegations or transactions that are already the subject of a civil suit, criminal investigation or prosecution, or an administrative investigation or proceeding to which the state or the federal government is already a party. The court shall dismiss an action brought in violation of this subsection.
- 15. Unless the person is the original source of the information, a person, other than the attorney general, shall not initiate an action under this section based on the public disclosure of allegations or transactions in a criminal, civil, or administrative hearing in a state or federal department or agency, a legislative report, hearing, audit, or investigation, or the news media. The person is the original source if

- 126 he or she had direct and independent knowledge of the information on
- 127 which the allegations are based and voluntarily provided the
- 128 information to the attorney general as part of the filing of an action
- 129 based on that information under this section.
- 130 16. The attorney general shall not be liable for any expenses,
- 131 costs, or attorney's fees that a person incurs in bringing an action
- 132 under this section. Any amount awarded to a person initiating an
- 133 action to enforce sections 191.900 to 191.910 is payable solely from the
- 134 proceeds of the action or settlement.
- 135 17. If the attorney general initiates an action for a violation of
- 136 sections 191.900 to 191.910, or assumes control of an action initiated by
- 137 a person under this section, the attorney general shall be awarded its
- 138 reasonable attorney's fees, expenses, and costs.
- 139 18. The attorney general shall establish guidelines for enforcing
- 140 and implementing the provisions of this section. Such guidelines shall
- 141 be modeled upon the standards established by the "Guidance on the Use
- 142 of the Civil False Claims Act in Civil Health Care Matters" issued by the
- 143 United States Department of Justice on June 3, 1998, including any
- 144 revisions to the standards. In developing such guidelines, the attorney
- 145 general may solicit comments from health care providers.
- 146 19. Venue for an action brought under this section shall be in
- 147 Cole County.
- 148 20. An action brought under this section shall not be brought
- 149 more than five years after the date on which the violation was
- 150 committed.
- 151 21. Nothing within this section shall be deemed to alter the
- 152 statutes of limitations provided in section 516.105, RSMo, or section
- 153 **537.100**, RSMo.
  - 191.908. 1. An employer shall not discharge, demote, suspend,
  - 2 threaten, harass, or otherwise discriminate against an employee in the
  - 3 terms and conditions of employment because the employee initiates,
  - 4 assists in, or participates in a proceeding or court action under section
  - 5 191.900 to 191.910. Such prohibition shall not apply to an employment
  - 6 action against an employee who:
  - 7 (1) The court finds brought a frivolous or clearly vexatious
  - 8 claim;
  - 9 (2) The court finds to have planned, initiated, or participated in

- 10 the conduct upon which the action is brought; or
- 11 (3) Is convicted of criminal conduct arising from a violation of sections 191.900 to 191.910.
- 2. An employer who violates this section is liable to the employeefor all of the following:
- 15 (1) Reinstatement to the employee's position without loss of 16 seniority;
- 17 (2) Two times the amount of lost back pay;
- 18 (3) Interest on the back pay;
- 19 (4) Compensation for any special damages;
- 20 (5) Any other relief necessary to make an employee whole.
- 191.909. 1. By January 1, 2007, and annually thereafter, the attorney general's office shall report to the general assembly and the governor the following:
- 4 (1) The number of provider investigations due to allegations of violations under sections 191.900 to 191.910 conducted by the attorney 6 general's office and completed within the reporting year, including the 7 age and type of cases;
- 8 (2) The number of referrals due to allegations of violations under 9 sections 191.900 to 191.910 received by the attorney general's office;
  - (3) The total amount of overpayments identified as the result of completed investigations;
  - (4) The amount of fines and restitutions ordered to be reimbursed, with a delineation between amounts the provider has been ordered to repay, including whether or not such repayment will be completed in a lump sum payment or installment payments, and any adjustments or deductions ordered to future provider payments;
- 17 (5) The total amount of monetary recovery as the result of 18 completed investigations;
- 19 (6) The total number of arrests, indictments, and convictions as 20 the result of completed investigations.
- 21 An annual financial audit of the Medicaid fraud unit within the
- 22 attorney general's office shall be conducted and completed by the state
- 23 auditor in order to quantitatively determine the amount of money
- 24 invested in the unit and the amount of money actually recovered by
- 25 such office.

11 12

13

14

1516

26 2. By January 1, 2007, and annually thereafter, the department

39

- of social services shall report to the general assembly and the governor the following:
- (1) The number of medicaid provider and recipient investigations and audits relating to allegations of violations under sections 191.900 to 191.910 completed within the reporting year, including the age and type of cases;
- 33 (2) Number of medicaid long-term care facility reviews;
- 34 (3) Number of medicaid provider and recipient utilization 35 reviews;
- 36 (4) The number of referrals sent by the department to the 37 attorney general's office;
  - (5) The total amount of overpayments identified as the result of completed investigations, reviews, or audits;
- 40 (6) The amount of fines and restitutions ordered to be 41 reimbursed, with a delineation between amounts the provider has been 42 ordered to repay, including whether or not such repayment will be 43 completed in a lump sum payment or installment payments, and any 44 adjustments or deductions ordered to future provider payments;
- 45 (7) The total amount of monetary recovery as the result of 46 completed investigation, reviews, or audits;
- 47 (8) The number of administrative sanctions against medicaid 48 providers, including the number of providers excluded from the 49 program.
- An annual financial audit of the program integrity unit within the department of social services shall be conducted and completed by the state auditor in order to quantitatively determine the amount of money invested in the unit and the amount of money actually recovered by such office.
  - 191.910. 1. The attorney general shall have authority to investigate alleged or suspected violations of sections 191.900 to 191.910, and shall have all powers provided by sections 407.040 to 407.090, RSMo, in connection with investigations of alleged or suspected violations of sections 191.900 to 191.910, as if the acts enumerated in subsections 1 to 3 of section 191.905 are unlawful acts proscribed by chapter 407, RSMo, provided that if the attorney general exercises such powers, the provisions of section 407.070, RSMo, shall also be applicable; and may exercise all of the powers provided by sections 542.271 to 542.296, RSMo, in connection with investigations of alleged

10 suspected violations of sections 191.900 to 191.910; and may exercise all of the powers provided by subsections 1 and 2 of section 578.387, RSMo, in 11 connection with investigations of alleged or suspected violations of sections 12 13 191.900 to 191.910, as if the acts enumerated in subsections 1 to 3 of section 191.905 involve "public assistance" as defined by section 578.375, RSMo. The 1415 attorney general and his or her authorized investigators shall be authorized to serve all subpoenas and civil process related to the enforcement of sections 16 17 191.900 to 191.910 and chapter 407, RSMo. [In order for the attorney general to 18 commence a state prosecution] For violations of sections 191.900 to 191.910, the attorney general shall either commence a state prosecution or prepare and 19 20 forward a report of the violations to the appropriate prosecuting attorney. Upon 21receiving a referral, the prosecuting attorney shall either commence a prosecution based on the report by the filing of a complaint, information, or indictment within 2223sixty days of receipt of said report or shall file a written statement with the attorney general explaining why criminal charges should not be brought. This 24time period may be extended by the prosecuting attorney with the agreement of 2526 the attorney general for an additional sixty days. If the prosecuting attorney commences a criminal prosecution, the attorney general or his designee shall be 27 permitted by the court to participate as a special assistant prosecuting attorney 28 29 in settlement negotiations and all court proceedings, subject to the authority of 30 the prosecuting attorney, for the purpose of providing such assistance as may be 31 necessary. If the prosecuting attorney fails to commence a prosecution and fails 32 to file a written statement listing the reasons why criminal charges should not be brought within the appropriate time period, or declines to prosecute on the 33 34 basis of inadequate office resources, the attorney general shall have authority to commence prosecutions for violations of sections 191.900 to 191.910. In cases 35 36 where a defendant pursuant to a common scheme or plan has committed acts which constitute or would constitute violations of sections 191.900 to 191.910 in 37 more than one state, the attorney general shall have the authority to represent 38 39 the state of Missouri in any plea agreement which resolves all criminal 40 prosecutions within and without the state, and such agreement shall be binding 41 on all state prosecutors.

2. In any investigation, hearing or other proceeding pursuant to sections 191.900 to 191.910, any record in the possession or control of a health care provider, or in the possession or control of another person on behalf of a health care provider, including but not limited to any record relating to patient care,

59

60

61 62

63

64

65

66

67 68

69

70 71

73

75

business or accounting records, payroll records and tax records, whether written 46 47 or in an electronic format, shall be made available by the health care provider to the attorney general or the court, and shall be admissible into evidence, 48 49 regardless of any statutory or common law privilege which such health care provider, record custodian or patient might otherwise invoke or assert. The 50 51provisions of section 326.151, RSMo, shall not apply to actions brought pursuant to sections 191.900 to 191.910. The attorney general shall not disclose any record 5253obtained pursuant to this section, other than in connection with a proceeding 54instituted or pending in any court or administrative agency. The access, provision, use, and disclosure of records or material subject to the provisions of 55 42 U.S.C. section 290dd-2 shall be subject to said section, as may be amended 56 from time to time, and to regulations promulgated pursuant to said section. 57

- 3. A health care provider shall maintain adequate records necessary to fully disclose the nature of the health care for which a claim was submitted or payment was received under a medical assistance program, or such records as are necessary to fully disclose all income and expenditures upon which rates of payment were based under a medical assistance program. Upon submitting a claim for or upon receiving payment for health care under a medical assistance program, a health care provider shall maintain adequate records for at least five years after the date on which payment was received, if payment was received, or for five years after the date on which the claim was submitted, if payment was not received. Any provider who fails to maintain adequate records as provided by this subsection shall be guilty of a class A misdemeanor.
- 4. No person knowingly shall destroy or conceal such records as are necessary to fully disclose the nature of the health care for which 72a claim was submitted or payment was received under a medical 74assistance program, or such records as are necessary to fully disclose all income and expenditures upon which rates of payment were based 76under a medical assistance program. Upon submitting a claim for or 77upon receiving payment for health care under a medical assistance 78program, a person shall not destroy or conceal any records for five years after the date on which payment was received, if payment was 79 80 received, or for five years after the date on which the claim was submitted, if payment was not received. Any provider who knowingly

82 destroys or conceals such records shall be guilty of a class A 83 misdemeanor.

84 5. Sections 191.900 to 191.910 shall not be construed to prohibit or limit any other criminal or civil action against a health care provider for the violation 85 of any other law. Any complaint, investigation or report received or completed 86 pursuant to sections 198.070 and 198.090, RSMo, subsection 2 of section 205.967, 87 RSMo, sections 375.991 to 375.994, RSMo, section 578.387, RSMo, or sections 88 660.300 and 660.305, RSMo, which indicates a violation of sections 191.900 to 89 90 191.910, shall be referred to the attorney general. A referral to the attorney 91 general pursuant to this subsection shall not preclude the agencies charged with 92 enforcing the foregoing sections from conducting investigations, providing 93 protective services or taking administrative action regarding the complaint, 94 investigation or report referred to the attorney general, as may be provided by such sections; provided that all material developed by the attorney general in the 95 course of an investigation pursuant to sections 191.900 to 191.910 shall not be 96 subject to subpoena, discovery, or other legal or administrative process in the 97 98 course of any such administrative action. Sections 191.900 to 191.910 take precedence over the provisions of sections 198.070 and 198.090, RSMo, subsection 99 100 2 of section 205.967, RSMo, sections 375.991 to 375.994, RSMo, section 578.387, 101 RSMo, and sections 660.300 and 660.305, RSMo, to the extent such provisions are 102 inconsistent or overlap.

191.914. Any person who intentionally files a false report or claim alleging a violation of sections 191.900 to 191.910 shall be guilty of a class A misdemeanor. Any person who previously has been convicted of making a false report or claim under this section and who is subsequently convicted of making a false report or claim under this section shall be guilty of a class D felony and shall be punished as provided by law.