



CMS Extends Timeline to Finalize Overpayment Regulations

Today, the Centers for Medicare and Medicaid Services (CMS) [released a notice](#) giving itself a one-year extension on finalizing its Proposed Rule on Reporting and Returning Overpayments. CMS issued the Proposed Rule on February 16, 2012, and the healthcare community responded with hundreds of comments criticizing many aspects of CMS' proposal. The Social Security Act requires CMS to finalize proposed rules within three years unless there are exceptional circumstances warranting an extension, meaning that deadline for CMS to finalize the Proposed Rule was approaching on February 16, 2015. The agency stated that it needs more time due to "significant policy and operational issues that need to be resolved in order to address all of the issues raised by comments to the proposed rule and to ensure appropriate coordination with other government agencies." Healthcare providers will likely have to wait until February 2016 to have clearer guidance on their obligations to report and return overpayments to the Medicare and Medicaid programs. Please see our [prior Client Advisory on the Proposed Rule](#) and what it means for the provider community.

If you have questions about the Proposed Rule or need assistance navigating the process of returning Medicare or Medicaid overpayments, please contact Mary Malone, Emily Towey, Michelle Calloway or Colin McCarthy at (866) 967-9604 or by email at mmalone@hdjn.com, etowey@hdjn.com, mcalloway@hdjn.com, or cmccarthy@hdjn.com. Additional information about Hancock, Daniel, Johnson & Nagle, P.C. is available on the firm's website at www.hdjn.com.

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