## THE HEALTH CARE FALSE CLAIM ACT (EXCERPT) Act 323 of 1984

## 752.1002 Definitions.

Sec. 2. As used in this act:

- (a) "Claim" means any attempt to cause a health care corporation or health care insurer to make the payment of a health care benefit.
- (b) "Deceptive" means making a claim to a health care corporation or health care insurer which contains a statement of fact or which fails to reveal a material fact, which statement or failure leads the health care corporation or health care insurer to believe the represented or suggested state of affair to be other than it actually is.
  - (c) "False" means wholly or partially untrue or deceptive.
- (d) "Health care benefit" means the right under a contract or a certificate or policy of insurance to have a payment made by a health care corporation or health care insurer for a specified health care service.
- (e) "Health care corporation" means a nonprofit dental care corporation incorporated under Act No. 125 of the Public Acts of 1963, being sections 550.351 to 550.373 of the Michigan Compiled Laws; a hospital service corporation, medical care corporation, or a consolidated hospital service corporation and medical care corporation incorporated or reincorporated under Act No. 350 of the Public Acts of 1980, being sections 550.1101 to 550.1704 of the Michigan Compiled Laws, or incorporated or consolidated under Act No. 108 or 109 of the Public Acts of 1939; or a health maintenance organization licensed under Act No. 368 of the Public Acts of 1978, being sections 333.1101 to 333.25211 of the Michigan Compiled Laws.
- (f) "Health care insurer" means any insurance company authorized to provide health insurance in this state or any legal entity which is self-insured and providing health care benefits to its employees.
- (g) "Health facility or agency" means a health facility or agency, as defined in section 20106 of the public health code, Act No. 368 of the Public Acts of 1978, being section 333.20106 of the Michigan Compiled Laws
- (h) "Knowing" and "knowingly" means that a person is in possession of facts under which he or she is aware or should be aware of the nature of his or her conduct and that his or her conduct is substantially certain to cause the payment of a health care benefit. "Knowing" or "knowingly" does not include conduct which is an error or mistake unless the person's course of conduct indicates a systematic or persistent tendency to cause inaccuracies to be present.
  - (i) "Person" means an individual, corporation, partnership, association, or any other legal entity.

History: 1984, Act 323, Eff. Mar. 29, 1985.