

(ii) 1 shall be chosen by the appointed members.

(4) Of the 2 appointed members of a board:

(i) 1 shall be a representative of the industry affected who is an individual knowledgeable in Medicare and Medicaid reimbursement principles; and

(ii) 1 shall be an individual who is employed by this State and knowledgeable in Medicare and Medicaid reimbursement principles and who does not participate directly in the field verifications.

(c) If the Department or an agent of the Department does a field verification of the costs and allowable charges of a hospital, intermediate care facility, or skilled nursing facility that participates in the Program, the Department or agent shall notify the hospital or facility of the results of the field verification.

(d) (1) A hospital or facility may appeal the results of a field verification by filing written notice with the appropriate board within 30 days after the hospital or facility receives the notice from the Department or its agent.

(2) IF A FACILITY OTHER THAN A HOSPITAL, OR IF THE DEPARTMENT IS AGGRIEVED BY A FINAL DECISION OF THE BOARD UNDER THIS SECTION, THE FACILITY OR THE DEPARTMENT SHALL PLACE ANY MONEY DUE FROM THE FACILITY OR FROM THE DEPARTMENT IN AN INTEREST BEARING ESCROW ACCOUNT. THE MONEY SHALL REMAIN IN ESCROW UNTIL A FINAL DECISION HAS BEEN RENDERED.

(3) UPON A FINAL DETERMINATION OF THE DISPUTE, THE APPROPRIATE PERSON ADMINISTERING THE ESCROW ACCOUNT SHALL DISTRIBUTE THE MONEY IN THAT ACCOUNT, INCLUDING ANY INTEREST ACCRUED, IN CONFORMITY WITH THE FINAL DETERMINATION.

(e) (1) After the Department receives the findings of a board, the Department shall determine the amount that is due to this State and notify the hospital or facility of that amount.

(2) Within 60 days after notification, the hospital or facility shall pay the amount due the Department. After the 60-day period ends, the Department, in addition to any other rights or remedies that may be available, shall recover the unpaid balance by withholding up to 20 percent from payments that otherwise would be due or payable to the hospital or facility.

(F) (1) ANY PERSON HOSPITAL OR FACILITY AGGRIEVED BY A FINAL REIMBURSEMENT DECISION OF THE BOARD UNDER THIS SECTION MAY NOT APPEAL TO THE BOARD OF REVIEW BUT MAY TAKE A DIRECT JUDICIAL APPEAL.

(2) THE APPEAL SHALL BE MADE AS PROVIDED FOR JUDICIAL REVIEW OF FINAL DECISIONS IN THE ADMINISTRATIVE PROCEDURE ACT.