MAINE STATE LEGISLATURE

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128th MAINE LEGISLATURE

FIRST REGULAR SESSION-2017

Legislative Document

No. 967

H.P. 680

House of Representatives, March 9, 2017

An Act To Ensure Access to Community Services for Persons with Intellectual Disabilities or Autism

(EMERGENCY)

Reference to the Committee on Health and Human Services suggested and ordered printed.

ROBERT B. HUNT Clerk

R(+ B. Hunt

Presented by Representative HERBIG of Belfast.
Cosponsored by Senator HAMPER of Oxford and
Representatives: CEBRA of Naples, FREY of Bangor, GATTINE of Westbrook, HARVELL
of Farmington, HYMANSON of York, MALABY of Hancock, Senator: LIBBY of
Androscoggin.

•	Whereas, the people of the State expect and need to ensure that high-quality care is ded in community-based care settings for vulnerable persons with intellectual elities or autism; and
intelle in 20	Whereas, reimbursement rates paid for community-based services for persons with ectual disabilities or autism have been reduced by 12% relative to rates established 107, while the federal Consumer Price Index medical care services index has used by 17% since 2007; and
intell	Whereas, the capacity of community-based providers to serve persons with ectual disabilities or autism has been impaired by declining reimbursement rates and used costs beyond the control of those providers; and
disab	Whereas, in order to provide high-quality care to persons with intellectual ilities or autism, the Legislature must take prompt action to correct chronic funding and to ensure the continued viability of these providers; and
the n	Whereas, in the judgment of the Legislature, these facts create an emergency within neaning of the Constitution of Maine and require the following legislation as diately necessary for the preservation of the public peace, health and safety; now fore,
Be it	enacted by the People of the State of Maine as follows:
Be it	enacted by the People of the State of Maine as follows: ec. 1. 22 MRSA §3195 is enacted to read: 5. Compensation for care provided to persons with intellectual disabilities of
Be it	enacted by the People of the State of Maine as follows: ec. 1. 22 MRSA §3195 is enacted to read: 5. Compensation for care provided to persons with intellectual disabilities of autism
Be it S §319: Main by th comn that 1 estab	ec. 1. 22 MRSA §3195 is enacted to read: 5. Compensation for care provided to persons with intellectual disabilities of autism 7. Reimbursement. The department shall reimburse services provided to eCare member adults with intellectual disabilities or autism under a waiver granted to federal Centers for Medicare and Medicaid Services for home-based and munity-based care on the basis of rates and a methodology for application of the rates effects assessment of individual need and applies criteria for resource allocation ished by the department pursuant to this section. This section applies to all funds ding federal funds, paid by any agency of the State to a provider for care covered by
Be it S §3199 1 Main by the comment that in estable include the week.	ec. 1. 22 MRSA §3195 is enacted to read: 5. Compensation for care provided to persons with intellectual disabilities of autism 7. Reimbursement. The department shall reimburse services provided to eCare member adults with intellectual disabilities or autism under a waiver granted to federal Centers for Medicare and Medicaid Services for home-based and munity-based care on the basis of rates and a methodology for application of the rates effects assessment of individual need and applies criteria for resource allocation ished by the department pursuant to this section. This section applies to all funds ding federal funds, paid by any agency of the State to a provider for care covered by
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Emergency preamble. Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

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- them, including without limitation compliance with all federal standards with regard to access to covered services under the Medicaid program;
- C. Are based upon the costs and reimbursement levels under the methodology and findings contained in a report by the department pursuant to Public Law 2005, chapter 12, Part CCCC, section 1 and implemented in 2007, adjusted for the cumulative increase in costs measured by the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index in each year from 2007 to 2016;
 - D. Provide for and reflect, for each state fiscal year ending after 2016, an annual inflation adjustment using a regional inflation factor established by a national economic research organization; and
- E. Take into account competitive wage markets, state and federal requirements with regard to training and qualifications of staff, and increases in the cost of new technologies required and expected of providers since 2007.
- Rules adopted pursuant to this subsection are major substantive rules as defined in Title 5, chapter 375, subchapter 2-A.
 - **Emergency clause.** In view of the emergency cited in the preamble, this legislation takes effect when approved.

19 SUMMARY

This bill requires the Department of Health and Human Services to reimburse services provided to MaineCare member adults with intellectual disabilities or autistic disorder under a waiver granted by the federal Centers for Medicare and Medicaid Services for home-based and community-based care on the basis of rates and a methodology for application of the rates that reflects assessment of individual need and applies criteria for resource allocation established by the department pursuant to criteria established in the bill. The bill also directs the department to adopt rules providing reimbursement rates that take into account specified costs of care and service; suffice to ensure access, including compliance with federal standards; are based on a 2007 report of the department adjusted for cost increases from 2007 to 2016; provide future annual inflation adjustments; and consider competitive wage markets, training and qualification requirements and increased costs of new technologies.