

# MAINE STATE LEGISLATURE

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L.D. 1974

Date: 3/13/20

(Filing No. S-433)

**HEALTH AND HUMAN SERVICES**

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**STATE OF MAINE**

**SENATE**

**129TH LEGISLATURE**

**SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to S.P. 676, L.D. 1974, Bill, "An Act To Promote Telehealth"

Amend the bill by inserting after the title and before the enacting clause the following:

**'Emergency preamble. Whereas,** acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

**Whereas,** case management services are an essential component of serving Medicaid members; and

**Whereas,** the emerging spread of COVID-19 may make it unsafe to provide in-person case management services to Medicaid members; and

**Whereas,** in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,'

Amend the bill by striking out all of sections 2 and 3 and inserting the following:

**'Sec. 2. 22 MRSA §3173-I, sub-§2,** as enacted by PL 2017, c. 307, §3, is amended to read:

**2. Meetings.** The advisory group shall hold at least one regular meeting ~~and no more than 4 meetings~~ each year.

**Sec. 3. 24-A MRSA §4316, sub-§1, ¶A-1** is enacted to read:

A-1. "Medicare" means the "Health Insurance for the Aged Act," Title XVIII of the Social Security Amendments of 1965, as amended.'

Amend the bill by inserting after section 3 the following:

**'Sec. 4. 24-A MRSA §4316, sub-§9** is enacted to read:

**COMMITTEE AMENDMENT**





Approved: 03/12/20 *MAC*

# 129th MAINE LEGISLATURE

LD 1974

LR 2738(02)

## An Act To Promote Telehealth

Fiscal Note for Bill as Amended by Committee Amendment "A" (S-433)

Committee: Health and Human Services

Fiscal Note Required: Yes

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### Fiscal Note

Potential current biennium cost increase - General Fund

Potential current biennium cost increase - Federal Expenditures Fund

#### Fiscal Detail and Notes

This bill directs the Department of Health and Human Services to amend its rule Chapter 101: MaineCare Benefits Manual, Chapter I, Section 4, Telehealth and Chapter 101: MaineCare Benefits Manual, Chapter II, Section 13, Targeted Case Management Services (TCM) to provide for reimbursement of case management services delivered through telehealth to targeted populations. Providers of telehealth services must submit claims for the same procedure codes and rates that apply to the underlying Covered Service as if those services were delivered face to face. Additionally, the Health Care Provider at the Originating Site may bill MaineCare for an Originating Facility Fee and this fee is above and beyond the normal fee for the service. This additional fee could lead to additional costs above what is currently paid for TCM services. However, this additional fee is utilized infrequently for current services that use telehealth and new telehealth services are slow to gain acceptance. Any potential new costs related to this charge are expected to be minimal at first with a slow increase in costs over time.