

MAINE STATE LEGISLATURE

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JOHN ELIAS BALDACCI
GOVERNOR

STATE OF MAINE
DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES
BUREAU OF THE BUDGET
58 STATE HOUSE STATION
AUGUSTA, MAINE
04333-0058

O.F.P.R.

2010 DEC 17 AM 10:07

To: Committee on Appropriations & Financial Affairs
From: Dawna Lopatosky, Acting State Budget Officer
Date: December 17, 2010
Subject: Federal Mandates

DJL

The State Budget Officer is required by 5 M.R.S.A., Section 1670, to submit a list of any new laws, regulations, or other actions that may require the State to comply with any new federal mandate in the current biennium or the next biennium.

Attached please find the report of federal mandates as submitted from the various State departments and agencies.

If you should have any questions regarding this report, please do not hesitate to contact the Budget Office at (207) 624-7810.

Thank you.

DJL/kb

cc: Grant Pennoyer, Director, OFPR
Ellen Schneider, Commissioner, DAFS

FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- STATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
Maine Arts Commission FFATA			FFATA was signed into law in September of 2006 and requires that information on federal contracts and awards be made available to the public via an easy to use single, searchable website, www.usaspending.gov .		13		FY2012

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059
060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- STATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
15A	1315A10801 MILITARY TRAINING/OPERATIONS (MMA)	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	*0.00	FY11
15A	1315A10802 STARBASE PROGRAM	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A10830 MILITARY TRAINING/OPERATIONS	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A10860 MILITARY CONSTRUCTION	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A10930 ADMIN - DEFENSE & VETERANS SER	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A11030 VETERANS SERVICES	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A11130 VETERANS MEMORIAL CEMETERY	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A21035 POPULATION PROTECTION PLANNING	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A21234 RADIOLOGICAL ACCOUNT	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A21430 ME EMERGENCY MANAGEMENT AGENCY	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A21431 DISASTER ASSISTANCE	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A78903 MEMA - HAZARDOUS MITIGATION	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
15A	1315A85810 STREAM GAGING COOPERATIVE	P.L. 109-282 and 110-24	Federal Funding Accountability and Transparency Act.	30-Nov-10	013	\$0.00	FY11
			<p>* Complying with this mandate will not result in addition costs for the Department of Defense, Veterans Services and Maine Emergency Management. Instructions for complying with this mandate can be found at: www.fsr.gov</p>				

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059
 060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

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Maine Department of Education			<p>The Federal Funding Accountability and Transparency Act (FFATA) was signed into law by President George W. Bush on September 26, 2006. The purpose of FFATA is to increase transparency on federal spending, publicly making the information available to citizens.</p> <p>FFATA requires significant reporting information, at the prime and first-tier subaward level (both grant agreements and Agreements to Purchase Services), to be displayed through a single federal searchable website, www.usaspending.gov.</p> <p>Implementation of FFATA has been slow to date; however, President Obama has made it a primary objective of his Open Government directive. Beginning October 1, 2010, state agencies in receipt of federal funding have significant responsibilities under the Act.</p> <p>The FFATA reporting requirements for subaward data began on October 1, 2010, applying to both grants and contracts. The prime recipient (MDOE) will be responsible for providing a number of data elements for the prime award and first-tier sub-recipients.</p> <p>These elements include information such as (not a complete list):</p> <ul style="list-style-type: none"> · Recipient information (DUNS, Address, Congressional District) · Place of Performance · Project Description · Funding Amount · Subaward Recipient Data (DUNS, Address, Place of Performance) · Name and Compensation of Prime and Subawardee 5 highest-paid Officers (if applicable) · Subaward Project Description <p>N.B., Expenditure reporting is not required at this time, only total Prime Award and total Subaward</p> <p>As implementation begins, further information may be required by the federal Office of Management and Budget (OMB).</p> <p>The FFATA requirement applies to federal awards after or on October 1st, and reporting deadlines will be on a rolling basis. The Prime Recipient (MDOE) must provide the required information by the end of the month following the month the award and subaward or obligation was made. For example, if the prime awards a subaward on November 13, 2010, then the Prime Recipient must report the required information on that subaward by December 31, 2010. Per federal guidance, the Prime Recipient is responsible for reporting and this responsibility cannot be delegated to the Sub-Recipients.</p> <p>STATE IMPLEMENTATION OF FFATA</p> <p>To date, the federal OMB has issued one guidance document (August 27, 2010), along with 3 appendices, on FFATA implementation. Those documents can be located online at http://www.whitehouse.gov/sites/default/files/omb/open/Executive_Compensation_Reporting_08272010.pdf</p> <p>Unlike with Recovery Act implementation and reporting, the State of Maine will not be using a centralized reporting model. Instead, each Department will develop its own centralized reporting model and is responsible for ensuring that it meets the requirements of FFATA.</p> <p>The Office of the DAFS Commissioner, the Office of the State Controller and the Office of Information Technology will provide periodic policy and technology support; however, they will not be responsible for completing the requirements or ensuring completion by state agencies.</p>	1-Oct-10	013		FY 2011

ARRA and FFATA

Note that the reporting requirements under FFATA are similar to those imposed by the ARRA; however, FFATA reporting is done on a rolling, month by month basis by program and ARRA involves quarterly reporting. At this time, FFATA requires the Prime Recipient (MDOE) to report total subaward amounts to Sub-Recipients: SAUs or other vendors. With a few exceptions, this will begin with new awards issued on or after July 1, 2011.

The Department of Education has:

Registered with FSRS and has access to the system.

Established an internal team to develop and implement a plan to meet FFATA requirements.

Received four (4) federal grant awards to date that are subject to FFATA reporting:

· Assistive Technology Act for State Grants for Assistive Technology prime award reported to FFATA on November 10, 2010. Sub-awards will not be made until Fall 2011.

· Food and Nutrition Service School Nutrition prime award reported to FFATA on November 10, 2010. These funds are disbursed to school units on a reimbursement basis; we are seeking federal guidance regarding FSRS sub-award reporting for reimbursement vs. total sub-award. The federal Program Manager is seeking clarification.

· ESEA Striving Readers Comprehensive State Formula Grant funds will be retained at the State level for administrative use; no sub-awards will be made. Need to report prime award when it appears in FSRS for verification.

· Safe and Drug Free Schools Capacity Building Grant funds will be sub-awarded to the Office of Substance Need to report prime award and sub-award when the prime award appears in FFATA for verification.

Current grants to which it applies and update of status:

- Safe and Drug Free
- Assistive Technology (in system)
- School Notification (in system)
- Striving Readers

\$125,000
\$79,341
\$80,223
\$150,000

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059, 060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

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Environmental Protection		FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT: P.L. 109-282 as amended by section 6202(1) of P.L. 110-252 (see 31 U.S.C. 6101 note).					
	HAZ WASTE MGMT PROGRAMS 01306A024713		FFATA online reporting	10/1/2010	13		2011
	OFFICE OF POLLUTION PREVENTION 01306A024714		FFATA online reporting	10/1/2010	13		2011
	DOD GRANT 01306A024715		FFATA online reporting	10/1/2010	13		2011
	HAZ WASTE MULTI-SITE I 01306A024723		FFATA online reporting	10/1/2010	13		2011
	LUST TRUST I & II 01306A024743		FFATA online reporting	10/1/2010	13		2011
	SUPER FUND CORE GRANT 01306A024773		FFATA online reporting	10/1/2010	13		2011
	COOPERATIVE AGREEMENT SUPERFUN 01306A024783		FFATA online reporting	10/1/2010	13		2011
	LUST TRUST I - LARGE CONTRACTS 01306A024793		FFATA online reporting	10/1/2010	13		2011
	CALLAHAN MINE SUPERFUND SITE 01306A024794		FFATA online reporting	10/1/2010	13		2011
	LAND QUALITY CONTROL PROGRAM 01306A024813		FFATA online reporting	10/1/2010	13		2011
	WATER QUALITY 01306A024823		FFATA online reporting	10/1/2010	13		2011
	AIR QUALITY CONTROL PROGRAMS 01306A025013		FFATA online reporting	10/1/2010	13		2011
	RESIDENTIAL WOOD STOVE REPLACE 01306A025023		FFATA online reporting	10/1/2010	13		2011
PPG - DEP 01306A085113		FFATA online reporting	10/1/2010	13		2011	

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DHHS - OIAS	MaineCare	PL111-148 and PL111-152	ACA - a maintenance of effort requirement mandates that states can not employ eligibility standards, methodologies or procedures that are more restrictive than those in effect on March 23, 2010.	23-Mar-10	10	TBD	SFY011
DHHS - OIAS	MaineCare	PL 110-252	Asset verification through access to information held by financial institutions Maine must have in place an asset verification program for the purposes of determining eligibility for medical assistance. This must be in place by the end of FFY 2013.	FFY2013	10	TBD	SFY013
DHHS - OMS	Pharmacy	PL 111-148, § 2501	(Affordable Care Act) Prescription drug rebates – “The flat rebate for single source and innovator multiple source outpatient prescription drugs would increase from 15.1 percent to 23.1 percent, except the rebate for clotting factors and outpatient drugs approved by the Food and Drug Administration exclusively for pediatric indications would increase to 17.1 percent. The basic rebate percentage for multi-source, non-innovator drugs would increase from 11 percent to 13 percent. Drug manufacturers would also be required to pay rebates for drugs dispensed to Medicaid beneficiaries who receive care from a Medicaid managed care organization (MCO). Total rebate liability would be limited to 100 percent of the average manufacturer price (AMP). <i>Additional revenue generated by these increases is remitted to the federal government</i> . Also, effective 3/23/10, the Reconciliation Bill narrowed the definition of a new formulation of drug for the purpose of applying the additional rebate.” (CMS)	1/1/2010		Estimated \$1,700,000- SFY 10; \$3,400,000- SFY 11; \$3,400,000- SFY 12; \$3,400,000- SFY 13	SFY 10
DHHS - OMS	Pharmacy	PL 111-148, § 2503	(Affordable Care Act) Medicaid Pharmacy Reimbursement (AMP Fix) “• Changes the Federal upper payment limit (FUL) to no less than 175 percent of the weighted average (determined on the basis of utilization) of the most recent AMPs for pharmaceutically and therapeutically equivalent multiple source drugs available nationally through commercial pharmacies. • Clarifies what transactions, discounts, and other price adjustments were included in the definition of AMP. • Clarifies that retail survey prices do not include mail order and long term care pharmacies. • Expands the disclosure requirement to include monthly weighted average AMPs and retail survey prices” (NCSL)	10/1/2010			SFY 11

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DHHS - OMS	Home Health, DME	PL 111-148 § 6407	(Affordable Care Act) "Face to face encounter with patient required before physicians may certify eligibility for home health services or durable medical equipment-- Requires physicians to have a face-to-face encounter with the individual prior to issuing a certification for home health services and/or written order for durable medical equipment. The Secretary would be authorized to apply for face-to-face encounter requirement to other items and services based upon a finding that doing so would reduce the risk of fraud, waste, and abuse".	1/1/2010			SFY 10
DHHS - OMS		PL 111-148 § 4107	(Affordable Care Act) Tobacco cessation services for pregnant women. States must cover counseling, pharmacological smoking cessation services for pregnant women.	10/1/2010		No fiscal impact, this is already being provided with no co-payment.	SFY 11
DHHS - OMS		PL 111-148 § 4106	(Affordable Care Act) Preventative Services. Provides 1 percentage point increase in FMAP for the preventative services set out by the US Preventative Services Task Force. Prohibits co-payments on those services.	1/1/2013 (optional coverage. Mandatory co-pay prohibition.)			SFY 13
DHHS - OMS		PL 111-148 § 2302	(Affordable Care Act) Hospice care for children-- Allows children who are enrolled in either Medicaid or CHIP to receive hospice services without foregoing curative treatment related to a terminal illness.	3/23/2010			SFY 10
DHHS - OMS		PL 111-148 § 2301	(Affordable Care Act) Coverage of services provided in Freestanding birth centers Freestanding birth centers are facilities separate from hospitals that provide prenatal, labor and delivery, and post-partum care. The state must cover a free standing birth center that is "licensed or otherwise approved by the State to provide prenatal labor and delivery or postpartum care and other ambulatory services that are included in the plan; and ... that complies with such other requirements relating to the health and safety of individuals furnished services by the facility as the State shall establish."	3/23/2010 (If legislation is needed to implement, states have until the 1st day of the quarter after the 1st session of the legislature).			SFY 10
DHHS - OMS		PL 111-148 § 2702	(Affordable Care Act) Prohibits federal payment for Health Acquired Conditions. Directs the Secretary to define HAC, consistent with the definition of hospital acquired conditions in Medicare, but considering differences between the two programs and not limiting it to conditions acquired in	7/1/2011			SFY 12
DHHS - OMS		PL 111-148 § 10201 (RB - 1202)	(Affordable Care Act) Payments to primary care physicians -- Requires that Medicaid payment rates to primary care physicians for furnishing primary care services be no less than 100% of Medicare payment rates in 2013 and 2014. Provides 100% federal funding for the incremental costs to States of meeting this requirement. (NCSL)	01/01/13			SFY 13
DHHS - OMS		PL 111-148 § 2701	(Affordable Care Act) Quality Measures for Maternity and Adult Health Services. HHS will propose standard quality measures for adults similar to CHIPRA to be implemented in the states	1/1/11 HHS Proposes 1/1/12 HHS Publishes			SFY 13
DHHS - OMS	MIHMS	PL 111-148 § 6506	(Affordable Care Act) Mandatory State use of national correct coding initiative -- Requires States to make their MMIS methodologies compatible with Medicare's national correct coding initiative (NCCI) that promotes correct coding and controls improper coding.	9/1/2010			SFY 11

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DHHS - OIAS/OMS	Eligibility, Healthcare Management	PL 111-148 § 2001, 10201, RB 1201	(Affordable Care Act) Coverage categories and income eligibility. Establishes minimum income eligibility level of Modified Adjusted Gross Income (MAGI) at 133% of FPL for those under 65 and not entitled to Medicare, with state option to provide either traditional Medicaid or supplemental wrap-around benefits to those above 133%. (Existing eligibility threshold for pregnant women remains the same.) Adds new mandatory categories of childless adults under 65, parents, and former foster care children under 26 (§ 2004).	1/1/14 (option to cover childless adults earlier)			SFY 14
DHHS - OMS	Program Integrity	PL 111-148 § 6505, 6402(a)	(Affordable Care Act) No payments to entities outside the United States. "[T]he State shall not provide any payments for items or services provided under the State plan or under a waiver to any financial institution or entity located outside of the United States; . . .". (ACA)	1/1/2011			SFY 10
DHHS - OMS		PL 111-148 § 10201 (RB - 1202)	(Affordable Care Act) Waiver process. "Increases the transparency of the Medicaid § 1115 waiver development and approval processes, at the State and federal levels by requiring the Secretary to promulgate regulations relating to the application and renewals of a demonstration project that provides for a process for public hearings." (CMS)	9/23/2011			SFY 12
DHHS - OMS	Program Integrity	PL 111-148 § 6505, 6402(a)	(Affordable Care Act) Overpayments – "Extends the period for States to recover overpayments due to fraud to one year after date of discovery of the overpayment, before an adjustment is made to the federal payment. If the State has not recovered the overpayment due to fraud within one year of discovery because there has not been a final determination of the overpayment amount, no adjustment shall be made in the Federal payment to such State on account of such overpayment (or portion thereof) before the date that is 30 days after the date on which a final judgment (including, if applicable, a final determination on an appeal) is made. The <i>Secretary shall promulgate regulations that require States to correct Federally identified claims overpayments, of an ongoing or recurring nature, with new Medicaid Management Information System (MMIS) edits, audits, or other appropriate corrective action.</i> Section 6402(a) of the Affordable Care Act also addresses overpayments. This provision, which amends the Act by creating a new section 1128J, has no impact on a State's obligations under section 6506 of the Afford	3/23/2010			SFY 10
DHHS - OMS	Program Integrity	PL 111-148 § 6401, 6402, 6501, 6502, 6503	(Affordable Care Act) Program integrity provisions. The ACA included numerous provisions in both Medicare and Medicaid to reduce fraud and abuse. These include –but are not limited to: Program Integrity - Required disclosure by providers and suppliers enrolling or reenrolling regarding affiliations with others that have uncollected debt, have had payments suspended, been excluded from a federal health care program, or had billing privileges revoked. Requires NPI on enrollment applications (eff. 1/1/11)	09/23/10; 01/01/11			SFY 11

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			<ul style="list-style-type: none"> - Termination of provider participation in Medicaid if provider had been terminated under Medicare or another state's Medicaid program (eff. 1/1/11) - Exclusion from participation of providers with ownership, control or management affiliations with entities that fail to repay overpayments or are excluded, suspended or terminated from Medicaid. (eff. 1/1/11) - Requires alternate payees (e.g. billing agents) that submit claims on behalf of health care providers to register with the state. (eff. 1/1/11). Requires states to contract with one or more Recovery Audit Contractors. (eff 1/1/11) 				
DHHS - OIAS/OMS	Eligibility, Indian Health	PL 111-5 § 5006	(ARRA) Protections for Indians in Medicaid and CHIP. Provides certain premium and cost-sharing projections under Medicaid and exemption for certain Indian-specific property from consideration in determining Medicaid eligibility and from Medicaid estate recovery. It also provides, certain Medicaid managed care protections for Indian health programs and Indian beneficiaries and establishes new requirements for consultation on Medicaid and CHIP with Indian health programs.	9/1/2009			SFY 10
DHHS - OMS	HealthCare Management	PL 111-5 § 4201	(ARRA) Medicaid Health Information Technology (HIT) Activities. Provides incentives to eligible Medicaid providers to adopt, implement and upgrade meaningfully use certified Electronic Health Record (HER) technology. The Recovery Act provides 100% Federal financial participation (FFP) to States for incentive payments to eligible providers. The States will be provided with 90% FFP match for State administrative expenses related to the program. In order to qualify for the 90% FFP administrative match, the State must, at a minimum, demonstrate compliance with three requirements: Administration, Oversight and Encourage the adoption of certified EHR technology and the electronic exchange of health information.	Spring 2011			SFY 11
DHHS - OMS	TPL	PL 109-171 § 603	(ARRA) Third Party Liability Activities. Provides tools to strengthen States' ability to identify and collect payments from liable third parties. This provision creates a process in which State Medicaid agencies and health plans may exchange eligibility and coverage data; including but not limited to: transition formats for sharing eligibility and benefit information between the State, or its agency, and health plans. The transmission formats are: Payer Initiated Eligibility/Benefit (PIE) Transaction, Accredited Standards Committee (ASC) X12 270-271 Health Care Eligibility/Benefit Inquiry and Response Standard Transactions ("270/271 Transactions"). The ACA includes a number of changes that will impact health information technology, including measures to accelerate the standardization of transactions ("Administrative Simplification" provisions). Such standardization could necessitate revisions of existing standards such as the 270/271 Transaction; any forthcoming changes made to the 271 as a result of the ACA may necessitate changes to the PIE Transaction in the future.				

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DHHS		PL 104-191 § 262	(Health Insurance Portability and Accountability Act) 5010 & ICD-10 • On January 1, 2012, standards for electronic health care transactions change from Version 4010/4010A1 to Version 5010. These electronic health care transactions include functions like claims, eligibility inquiries, and remittance advances. Version 5010 accommodates the ICD-10 codes, and must be in place first before the changeover to ICD-10. If providers do not conduct electronic health transactions using 5010 as of January 1, 2010, delays in claim reimbursement may result. If health plans cannot accept Version 5010 transactions from providers, they may experience a large increase in provider customer service inquiries affecting their operations. ICD-10 codes must be used on all HIPAA transactions, including outpatient claims with dates of service, and inpatient claims with dates of discharge on and after October 1, 2013.	ICD-10 10/01/13; 5010 01/01/12)			SFY 12- SFY 13
DHHS - Maine CDC	Maine Cancer Registry	NPCR of CDC has developed new standards for central registries.	Additional IT support and funding required to increase electronic reporting from hospitals, pathology labs, and physicians.		013	\$12,500	2011/12
DHHS - Maine CDC	Maine Cancer Registry	NPCR of CDC has developed new standards for central registries	On-site (hospital) audits with source material to assure quality of cancer reporting. In-state travel required.	1/7/2007	013	\$1,000.00	2011/12
DHHS - Maine CDC	Vital Statistics 014-10A-6906	Intelligence Reform	To establish minimum national standards for state and local vital statistics offices for national security purposes.	Not known. Possibly 7/3/1905	014/010	Not known.	10/11
DHHS - OCFS	Child Care Development Fund - 015-10A-05630	The CCDBG Act; Section 418 of the Social Security Act; 45 CFR Parts 98 and 99; Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996; 63 FR 41662 – 41686; ACYF-PI-CC-98-08.	A Lead Agency has flexibility to establish procedures for verifying an applicant's citizenship and immigration status when determining eligibility for CCDF services, but its procedures should be in accordance with Department of Justice requirements for verifying eligibility for "Federal public benefit" programs found in the November 17, 1997 Department of Justice Notice, "Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996." (62 FR 61344).	5/2/2008	015	Grant funds	ongoing
DHHS - OCFS	Child Welfare Fostering Connections ACYF-CB-PI-08-05	Sec. 473n (b)(3)(C)	Extends categorical Medicaid to children in kinship guardianship	Awaiting Federal Approval	010/013	TBD	ongoing

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DHHS - OCFS	Child Welfare Fostering Connections ACYF-CB-PI-08-05	Sec. 477 (a)(7)	Amends Educational and Training Vouchers (ETV) to 16	Awaiting Federal Approval	010/013	TBD	ongoing
DHHS - OCFS	Child Welfare Fostering Connections ACYF-CB-PI-08-05	Approved family connection grants - match funds to apply. Sec. 475 (8) (B) (iv)	Continue payments for over 18 who are enrolled in school, work	Awaiting Federal Approval	010/013	TBD	ongoing
DHHS - OCFS	Child Welfare Fostering Connections ACYF-CB-PI-08-05	Sec. 475(4)	Allows state to include cost of reasonable travel in foster care payment to keep child in same school.	Awaiting Federal Approval	010/013	TBD	ongoing

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059
060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- STATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
13A	01313A002730 01313A002940 01313A025810 01313AZ04930	P.L. 109-282 as amended by section 6202(1) of P.L. 110-252 (see 31 U.S.C. 6101 note).	Federal Awards [nonARRA (recovery act)] received by State agencies on or after October 1, 2010, are subject to new reporting requirements pursuant to the Federal Funding Accountability and Transparency Act (FFATA).	10/1/2010	013	UNFUNDED	2011-ON
13A	01313A710130	ESA Atlantic Salmon (RIN 0648-XJ93)	Atlantic Salmon listing was expanded in 2008. No additional funds were made available with this expand Endangered Species Act	1/1/2009	014	UNFUNDED	2009 - ON
13A	01313A710130	ESA of Atlantic Sturgeon (RIN 0648-XJ00)	NOAA listing Atlantic sturgeon as Threatened under Endangered Species Act	1/1/2011	014	UNFUNDED	2011 - ON

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059
 060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100
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FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT-STATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
Department of Professional and Financial Regulation	Office of Securities - 094301	Dodd-Frank Act Public Law 111-203 [H.R. 4173]	To place the regulation of investment advisers with assets under management of up to \$100 million under the jurisdiction of the Office of Securities; to increase the examination of those additional investment advisers switching from federal to state regulation, and to increase enforcement of state securities laws and regulations regarding those investment advisers switching from federal to state regulation.	July 21, 2011 for full implementation	014	\$158,370.00	FY2012

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059
 060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

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FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- STATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
Public Safety	010/01216A029101		There is a bill in the senate that deals with establishing policies for conducting criminal history background checks for child-serving organizations. The bill limits the cost to \$25. Public Safety charges \$21 - \$31. It also mandates a 2 day turnaround from receipt of request. It provides no funding for these requirements. Depending on what the final bill looks like, this could have a major impact on Public Safety.		010/012		2011 2012 2013

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059

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FEDERAL MANDATES

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENTATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
Secretary of State, Bureau of Motor Vehicles	Commercial Driver License Improvement Program 01329B00705	49 CFR Parts 383, 384, 390, 391, et al.	The United States Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA), implements effective January 30, 2012 section 215 of the Motor Carrier Safety Improvement Act of 1999 (MCSIA). FMCSA amends its regulations related to Medical Certification requirements as part of the Commercial Driver's License (CDL). The rule places the medical certification documentation requirements on those drivers required to obtain a CDL from a State who are also required to obtain a medical examiner certificate indicating that they are physically qualified to operate a commercial motor vehicle in interstate commerce. The rule also establishes requirements to be implemented by States to ensure that accurate, up-to-date information about the CDL holder's medical examiner's certificate will be contained in the electronic Commercial Driver License Information System (CDLIS) driver record in compliance with the CDL regulations. Finally, the rule requires States to take certain actions against CDL holders if they do not provide the required	30-01-12	013	\$700,000 (estimated cost)	FY12
Secretary of State, Bureau of Motor Vehicles	Administration Motor Vehicle 01229B007704	49 USC 30501-30505, PL 102-519 and PL 103-272	To comply with the National Motor Vehicle Title Information System (NMVTIS). NMVTIS is a mandatory title information exchange program managed by the American Association of Motor Vehicle Administrators (AAMVA). By federal law, every state will participate in NMVTIS to make their title information available to other states. This mandate was reported in FY09. Implementation is ongoing with a projected completion date in 2012.	2012	012	\$30,000 +	FY12

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 049, 055, 056, 057, 058, 059

060, 061, 062, 063, 065, 067, 069, 070, 071, 075, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 098, 099, 100

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