

# MAINE STATE LEGISLATURE

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1 SECOND REGULAR SESSION  
2

3 ONE HUNDRED AND ELEVENTH LEGISLATURE  
4

5 Legislative Document

No. 2207

6  
7 H.P. 1667

House of Representatives, March 9, 1984

8 Approved for introduction by the Legislative Council pursuant to Joint  
9 Rule 26.

10 Referred to the Joint Select Committee on Alcoholism Services. Sent up  
for concurrence and ordered printed.

EDWIN H. PERT, Clerk

Presented by Representative Rolde of York.

Cosponsor: Senator Bustin of Kennebec.

11  
12 STATE OF MAINE  
13

14 IN THE YEAR OF OUR LORD  
15 NINETEEN HUNDRED AND EIGHTY-FOUR  
16

17 AN ACT to Provide Medicaid Reimbursement  
18 for Substance Abuse Services.  
19

20 Be it enacted by the People of the State of Maine as  
21 follows:

22 Sec. 1. 22 MRSA §3173-D is enacted to read:

23 §3173-D. Reimbursement for alcoholism and drug de-  
24 pendency treatment

25 The department shall provide reimbursement, to  
26 the maximum extent allowable, under the United States  
27 Social Security Act, Title XIX, for alcoholism and  
28 drug dependency treatment. Treatment shall include,  
29 but need not be limited to, residential treatment and  
30 outpatient care as defined in Title 24-A, section  
31 2842.

32 Sec. 2. Effective date. This Act shall take ef-  
33 fect on January 1, 1985.

1 STATEMENT OF FACT

2 In the First Regular Session of the 111th Legis-  
3 lature, Public Law, chapter 527, was enacted requir-  
4 ing coverage of alcoholism and drug dependency treat-  
5 ment services by group health insurance policies and  
6 contracts. That law extended coverage to outpatient  
7 and nonhospital based residential treatment programs.  
8 This bill requires the Department of Human Services,  
9 consistent with federal law, to make Medicaid reim-  
10 bursements for those same services available to eli-  
11 gible recipients. In order to allow time to work out  
12 the administrative details, the new requirements  
13 would take effect on January 1, 1985. Enactment of  
14 this bill will result in substantial savings to the  
15 department by providing Medicaid reimbursement for  
16 services which the State would otherwise be forced to  
17 pay out of the General Fund or the Alcohol Premium  
18 Fund.

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