



114th MAINE LEGISLATURE

SECOND REGULAR SESSION - 1990

Legislative Document

No. 2210

S.P. 861

In Senate, January 19, 1990

Reported by Senator GAUVREAU of Androscoggin for the Committee on Human Resources pursuant to Joint Rule 19.

Reference to the Committee on Human Resources suggested and ordered printed pursuant to Joint Rule 19.

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JOY J. O'BRIEN Secretary of the Senate

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND NINETY

An Act to Increase the Capacity of the State to Provide Mental Health Services.

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

Sec. 1. 22 MRSA §3173, 13th ¶, as repealed and replaced by PL 1979, c. 127, §144, is amended to read:

The Department of Human Services may establish fee schedules 6 reimbursement for services provided under governing this 8 chapter. In establishing the fee schedules, the department shall consult with individual providers and their representative associations. In establishing fee schedules for community mental 10 health provider agencies, the department shall, using standard 12 methods established by the department, establish fees for all services based upon the full reasonable costs, including 14 training, recruitment and retention, attributable to each category of service. In determining full reasonable costs for community mental health services, the department shall consult 16 the Bureau of Mental Health. The fee schedules shall-be are subject to annual review. 18

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Sec. 2. 34-B MRSA c. 3, sub-c. III, art. III is enacted to read:

Article III

RESPITE SERVICES

26 §3651. Respite services

28 <u>1. Program development.</u> The department shall develop a program for the delivery of respite care services for mentally
 30 ill individuals and their families.

32 2. Program requirements. The department shall establish criteria for the funding of a demonstration respite care program
 34 that contains at least the following elements:

36 <u>A. The program must be available in areas of the State</u> providing geographic balance;

B. Respite care services must be provided by qualified mental health professionals as defined by the department;

- 42 <u>C. Respite care may be provided at the client's home or in</u> an apartment to be shared by the client and the respite care
 44 worker; and
- 46 <u>D. Respite care services must be available for a period of up to 2 weeks.</u>

3. Report. The department shall submit a report regarding the respite care program to the joint standing committee of the Legislature having jurisdiction over human resource matters by

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January 15, 1992. The report must include an evaluation of the program and recommendations on whether the program should be continued and expanded.

4. Sunset. This section is repealed October 1, 1992.

Sec. 3. Adjustments by the Department of Mental Health and Mental Retardation prohibited. The Department of Mental Health and Mental Retardation may not make any reductions in funds to community mental health providers or decrease the number of clients or units of service authorized as a result of the adjustments required in section 1 of this Act.

Sec. 4. Appropriation. The following funds are appropriated from the General Fund to carry out the purposes of this Act.

1990-91

\$840,000

MENTAL HEALTH AND MENTAL RETARDATION, 20 DEPARTMENT OF

22 Bureau of Mental Health

24 All Other

26 Provides \$800,000 for a demonstration
respite care program and \$40,000 to provide
28 a support group facilitator for 15 local
family support groups.

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STATEMENT OF FACT

This bill requires the Department of Human Services to set Medicaid reimbursement rates for community mental health services 36 at a rate that recognizes the full reasonable cost of those services. Currently, rates are set at a level that is too low, 38 resulting in the need for the State to cover the non-Medicaid 40 reimbursed costs of community providers. This bill will permit State take full advantage the to of federal Medicaid participation to cover the excess cost of services now being 42 covered completely with state funds.

This bill establishes a respite care services demonstration 46 program.

48 This bill provides that the savings in state funds resulting from increased Medicaid reimbursement will continue to be 50 available for community mental health providers.

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This bill appropriates funds for the respite care demonstration program and for a support group facilitator for local family support groups.

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