



119th MAINE LEGISLATURE

FIRST REGULAR SESSION-1999

Legislative Document

No. 1229

H.P. 872

House of Representatives, February 11, 1999

Resolve, to Promote Community Mental Health Services.

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

OSEPH W. MAYO, Clerk

Presented by Representative TESSIER of Fairfield. Cosponsored by Representatives: BRENNAN of Portland, BROOKS of Winterport, GAGNON of Waterville, HATCH of Skowhegan, KANE of Saco, MITCHELL of Vassalboro, QUINT of Portland, Senator: LONGLEY of Waldo.

Sec. 1. Rulemaking. Resolved: That by January 1, 2000 the 2 Department of Mental Health, Mental Retardation and Substance Abuse Services shall adopt rules to endure fair contracting for 4 community mental health services. The rules must separate the provision of community mental health services under the Medicaid program from grants to community mental health centers for the 6 provision of community mental health services. In the category of Medicaid reimbursable services, the rule must provide for 8 transfer to the provider of an amount to be used to match federal 10 funds. The rules must provide that the department will contribute funds in addition to the match amount if services are 12 provided that fully utilize the amount of funds. The rules must provide that unused match funds will revert to the department if they are not needed to provide services in that account in that 14 In the category of grant funds, the rules must budget year. 16 provide for payment of a grant in a fixed amount for mental health services, this amount being independent of the funds in the Medicaid match account. Rules adopted pursuant to this Act 18 are routine technical rules as defined by the Maine Revised 20 Statutes, Title 5, chapter 375, subchapter II-A.

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SUMMARY

26 This resolve requires the Department of Mental Health, Mental Retardation and Substance Abuse Services to adopt rules by 28 January 1, 2000 regarding community mental health services. The rules require contracts to separate fixed-amount grant funds from 30 Medicaid reimbursement funds, which would vary with the amount of services rendered by the mental health services provider.

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