



## **119th MAINE LEGISLATURE**

## FIRST REGULAR SESSION-1999

Legislative Document

No. 2099

H.P. 1467

House of Representatives, March 30, 1999

An Act to Provide Increased Access to Dental Care in Maine.

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

OSEPH W. MAYO, Clerk

Presented by Speaker ROWE of Portland. Cosponsored by Senator PARADIS of Aroostook and Representatives: KANE of Saco, MAILHOT of Lewiston, MAYO of Bath, PEAVEY of Woolwich, QUINT of Portland, TESSIER of Fairfield, Senators: MICHAUD of Penobscot, MILLS of Somerset.

	Be it enacted by the People of the State of Maine as follows:	
2	Sec. 1. 22 MRSA c. 416-A is enacted to read:	
4		
	<u>CHAPTER 416-A</u>	
6		
	DENTAL SERVICES	
8		
10	<u>§2127. Oral bealth care</u>	
TO	1. Access to quality oral health services. The department	
12	shall develop access to guality oral health services for	
	low-income residents with emphasis on underserved areas or	
14	populations by encouraging the development or expansion of	
	community-operated, nonprofit oral health care programs that	
16	serve persons who are uninsured or underinsured for oral health	
	care and that serve persons whose oral health care is covered by	
18	Medicaid.	
20	2. Development of oral health care programs. The	
~ ~	department shall use funds appropriated for the purposes of this	
22	chapter, any available funds from Medicaid or other resources to	
24	provide funding for the start-up or expansion of public or nonprofit oral health care programs; to subsidize the provision	
24	of oral health care to persons without insurance coverage for	
26	that care in accordance with paragraph B; and to provide oral	
	health case management and community oral health education	
28	designed to encourage good oral hygiene and to prevent oral	
	diseases and tooth decay. Any oral health care program receiving	
30	funds under this chapter must:	
32	A. Serve persons whose oral health care is covered by	
	<u>Medicaid;</u>	
34		
	B. Provide oral health care services to persons whose gross	
36	income is below 200% of the nonfarm income official federal	
20	poverty guidelines for whom insurance coverage is not	
38	available for the same payment as provided by Medicaid for the service if the subsidy described in this subsection is	
40	available. Persons without insurance to cover the service	
	required and who have an income under 200% of the nonfarm	
42	income official federal poverty guidelines must be charged	
	fees for oral health care on a sliding scale. The	
44	department shall establish the sliding scale by routine	
	technical rules adopted pursuant to Title 5, chapter 375,	
46	subchapter II-A. The difference between the Medicaid rate	
	and the payment made by the patient under the sliding fee	
48	arrangement must be paid to the oral health care program by	
	the department. If a Medicaid rate is not established for a	

2	<u>particular</u> service provided under this section, the department shall establish a rate for that service.
4	(1) Persons with gross income less than 100% of the nonfarm official federal poverty guidelines may not be
6	required to pay more than a nominal fee. For the purposes of this section, "nominal fee" has the same
8	meaning as it has under Medicaid.
10	(2) In determining gross income, the department shall
12	<u>permit the deduction of business-related expenses of those who are self-employed;</u>
14	<u>C. Be governed by a board, a majority of whose members are individuals who are or will be served by the program and</u>
16	who, as a group, represent the individuals being served in terms of demographic factors such as residing in the
18	community being served, income, race, ethnicity and gender, The board is responsible for:
20	(1) The establishment of the policy in the conduct of
22	the program;
24	(2) Holding regularly scheduled meetings, of which minutes must be kept;
26	
28	(3) Approval of the selection or dismissal of a program director or chief executive officer of the
30	program;
	(4) Establishing personnel policies and procedures,
32	including selection and dismissal procedures, salary and benefit scales, employee grievance procedures and
34	equal opportunity practices;
36	(5) Adopting policies for financial management
38	practices, including a system to ensure accountability
30	for program resources, approval of the annual program budget, program priorities, eligibility for services,
40	including criteria for partial payment schedules, and
	long-range financial planning;
42	(6) Evoluting program activities including corviges
44	(6) Evaluating program activities including services utilization patterns, program productivity, patient
	satisfaction, achievement of program objectives and
46	<u>development of a process for hearing and resolving</u> patient grievances;
48	

2	(7) Ensuring that the program is operated in			
	compliance with applicable federal, state and local			
	laws, rules and regulations; and			
4				
	(8) Adopting health care policies including scope and			
6	availability of services, location and hours of			
	services and quality of care audit procedures;			
8				
	D. Use any funds provided for the purposes of this chapter			
10 to supplement, and not supplant, other funds that a				
1 0	be available to the oral health care program:			
12	The Issue a national severalize process to determine			
14	E. Implement a patient screening process to determine patient eligibility for Medicaid, the Cub Care program under			
14	Title 22, section 3174-T and the sliding fee scale; and			
16	<u>IICIE 22, Section J1/4-1 and the Stiding tee State, and</u>			
<b>~</b> •	F. Employ at least one full-time equivalent dentist			
18	practicing general dentistry and be open for business at			
	least 20 hours a week, providing at least 4 hours of			
20	coverage during evenings or weekends.			
22	A program may not receive funds under this chapter to serve more			
	than 3 contiguous dental care analysis areas as defined by the			
24	<u>Bureau of Health in the department.</u>			
26	Discription of this is and here the second secon			
26	3. Discrimination prohibited. An oral health care program			
28	receiving funds under this chapter may not discriminate among			
20	patients within its service area based upon payment source except as specifically authorized in subsection 2, paragraph B.			
30	as specifically auchorized in subsection 2, paragraph B.			
50				
	4. Vouchers for private dental services. An oral health			
32	<b>4. Vouchers for private dental services.</b> An oral health program that receives funds under this chapter may establish a			
32	program that receives funds under this chapter may establish a			
	program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental			
32 34	program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in			
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34 36	program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in accordance with the provisions of this subsection. A. A voucher may be used only when: (1) A program chooses to provide specialized oral			
34 36	program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in accordance with the provisions of this subsection. A. A voucher may be used only when: (1) A program chooses to provide specialized oral health services to its patients but can not provide			
34 36 38 40	program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in accordance with the provisions of this subsection. A. A voucher may be used only when: (1) A program chooses to provide specialized oral			
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34 36 38 40 42	<pre>program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in accordance with the provisions of this subsection.</pre> A. A voucher may be used only when: <ul> <li>(1) A program chooses to provide specialized oral health services to its patients but can not provide these services directly;</li> <li>(2) The patient can not be served by the program with</li> </ul>			
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34 36 38 40 42 44	<pre>program that receives funds under this chapter may establish a voucher system for the purpose of reimbursing private dental providers providing services to patients of the program in accordance with the provisions of this subsection.</pre> A. A voucher may be used only when: <ul> <li>(1) A program chooses to provide specialized oral health services to its patients but can not provide these services directly;</li> <li>(2) The patient can not be served by the program with reasonable promptness; or</li> </ul>			

-	B. A voucher payment made to a private provider does not
2	exceed the difference between the patient's obligation, if any, under a sliding scale and the rate that Medicaid would
4	reimburse a private provider for that same service. If no
6	fee is established for the particular service in the Medicaid program, the department shall establish a fee; and
8	<u>C. A voucher payment is made only to a provider enrolled to provide services in the Medicaid program.</u>
10	
12	An oral health care program may place reasonable restrictions on a voucher system it establishes if those restrictions are consistent with the purposes of this chapter pursuant to
14	subsection 1.
16	Even though an oral health care program receives funds under this chapter for the purpose of serving part of its service area
18	through a voucher system, this does not prevent the application of another organization seeking funds under this chapter to
20	provide direct program services to the residents of that area.
22	5. Encouraging community support. The department shall
24	require any entity seeking funds for the start-up or expansion of oral health programs under this chapter to raise matching funds,
26	including in-kind support, sufficient to demonstrate community support.
20	
28	6. Coordination with Medicaid and the Cub Care program.
30	The department shall coordinate assistance under this chapter with Medicaid and the Cub Care program under Title 22, section
22	3174-T in a manner most likely to obtain and maximize federal
32	matching funds,
34	7. Rules. The department shall adopt rules, which are routine technical rules, pursuant to Title 5, chapter 375,
36	subchapter II-A, to implement this chapter.
38	Sec. 2. Evaluation and report. By February 1, 2001, the
40	Department of Human Services shall evaluate the status of access to oral health care for uninsured people in this State and those
	receiving Medicaid and shall report its findings to the joint
42	standing committee of the Legislature having jurisdiction over health and human services matters. The report must include
44	recommendations on the method that would be the most cost-effective for this State to meet the oral health needs of
46	low-income people.
48	Sec. 3. Appropriation. The following funds are appropriated

Sec. 3. Appropriation. The following funds are appropriated from the General Fund to carry out the purposes of this Act.

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2		1999-00	2000-01
4	HUMAN SERVICES, DEPARTMENT OF		
6	Bureau of Health		
8	All Other	\$200,000	\$250,000
10 12	Provides funds for start-up and expansion of oral health		
	care programs.		
14	Bureau of Health		
16	All Other	\$225,000	\$650,000
18	Provides funds to subsidize sliding fee scale programs		
20	for uninsured low-income people.		
22	Bureau of Health		
24		<b>4</b> 50 000	<b>#F0</b> 000
26	All Other	\$50,000	\$50,000
28	Provides funds for case management and community education and oral health		
30	education.		
32	<b>Bureau of Medical Services</b>		
34	All Other	\$25,000	\$50,000
36	Provides funds for Medicaid		
38	targeted case management services for oral health care.		
40	DEPARTMENT OF HUMAN SERVICES TOTAL	\$500,000	\$1,000,000
42	Sec. 4. Allocation. The following fun		
44	Federal Expenditures Fund to carry out th		
46		1999-00	2000-01
48	HUMAN SERVICES, DEPARTMENT OF		

## **Bureau of Medical Services**

2			
	All Other	\$49,107	\$98,017
4			
	Allocates matching funds for		
б	targeted case management		
	services for oral health care.		
8	DEPARTMENT OF HUMAN SERVICES		
10	TOTAL	<u></u>	<u>+00.017</u>
10	IUIAL	\$49,107	\$98,017
12			
12	SUMMARY		
14	5 CHAINE AND A		
	This bill provides funds to increase	access to ora	l health
16	care for low-income children and adults		
	establishment and expansion of oral health		
18	available to all people regardless of inco		
	fee scale and accepting Medicaid without		-
20	programs will increase access to oral	health care	for the
	uninsured and underinsured and Medicaid pat	ients.	
22			