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L.D. 1303

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DATE: 5-30-01

(Filing No. H-639)

**MAJORITY
HEALTH AND HUMAN SERVICES**

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
120TH LEGISLATURE
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 979, L.D. 1303, Bill, "An Act to Increase Access to Health Care"

Amend the bill by striking out everything after the enacting clause and before the summary and inserting in its place the following:

PART A

Sec. A-1. 22 MRSA §254, sub-§1, ¶A, as enacted by PL 1999, c. 401, Pt. KKK, §1 and affected by §10 and c. 531, Pt. F, §2, is amended to read:

A. The basic component of the program must provide drugs and medications for cardiac conditions and high blood pressure, diabetes, arthritis, anticoagulation, hyperlipidemia, osteoporosis, chronic obstructive pulmonary disease and asthma, incontinence, thyroid diseases, glaucoma, parkinson's disease, multiple sclerosis and amyotrophic lateral sclerosis and cancer.

Sec. A-2. 22 MRSA §3174-G, sub-§1, ¶¶D and E, as enacted by PL 1999, c. 731, Pt. OO, §1, are amended to read:

D. A child one year of age or older and under 19 years of age when the child's family income is equal to or below 150% of the nonfarm income official poverty line; and

COMMITTEE AMENDMENT

2 E. The parent or caretaker relative of a child described in
3 paragraph B or D when the child's family income is equal to
4 or below 150% of the nonfarm income official poverty line,
5 subject to adjustment by the commissioner under this
6 paragraph. Medicaid services provided under this paragraph
7 must be provided within the limits of the program budget.
8 Funds appropriated for services under this paragraph must
9 include an annual inflationary adjustment equivalent to the
10 rate of inflation in the Medicaid program. On a quarterly
11 basis, the commissioner shall determine the fiscal status of
12 program expenditures under this paragraph. If the
13 commissioner determines that expenditures will exceed the
14 funds available to provide Medicaid coverage pursuant to
15 this paragraph, the commissioner must adjust the income
16 eligibility limit for new applicants to the extent necessary
17 to operate the program within the program budget. If, after
18 an adjustment has occurred pursuant to this paragraph,
19 expenditures fall below the program budget, the commissioner
20 must raise the income eligibility limit to the extent
21 necessary to provide services to as many eligible persons as
22 possible within the fiscal constraints of the program
23 budget, as long as the income limit does not exceed 150% of
24 the nonfarm income official poverty line; and

25 **Sec. A-3. 22 MRSA §3174-G, sub-§1, ¶F** is enacted to read:

26 F. A person 20 to 64 years of age who is not otherwise
27 covered under paragraphs A to E when the person's family
28 income is below or equal to 125% of the nonfarm income
29 official poverty line. The department may begin offering
30 coverage under this paragraph 3 months after obtaining
31 approval of a waiver for such coverage from the federal
32 Health Care Financing Administration.

33 **Sec. A-4. 22 MRSA §3174-T, sub-§2, ¶A**, as amended by PL 1999,
34 c. 401, Pt. QQ, §1 and affected by §5, is further amended to read:

35 A. The maximum eligibility level, subject to adjustment by
36 the commissioner under paragraph B, is ~~200%~~ 250% of the
37 nonfarm income official poverty line.

38 **Sec. A-5. 22 MRSA §3174-T, sub-§2, ¶¶D and E**, as reallocated by
39 RR 1997, c. 2, §46, are amended to read:

40 D. Notwithstanding changes in the maximum eligibility level
41 determined under paragraph B, the following requirements
42 apply to enrollment and eligibility:

(1) Children must be enrolled for ~~6-month~~ 12-month enrollment periods. Prior to the end of each ~~6-month~~ 12-month enrollment period the department shall redetermine eligibility for continuing coverage; and

(2) Children of higher family income may not be covered unless children of lower family income are also covered. This subparagraph may not be applied to disqualify a child during the ~~6-month~~ 12-month enrollment period. Children of higher income may be disqualified at the end of the ~~6-month~~ 12-month enrollment period if the commissioner has lowered the maximum eligibility level under paragraph B.

E. Coverage under the Cub Care program may be purchased for children described in subparagraphs (1) and (2) for a period of up to 18 months as provided in this paragraph at a premium level that is revenue neutral and that covers the cost of the benefit and a contribution toward administrative costs no greater than the maximum level allowable under COBRA. The department shall adopt rules to implement this paragraph. The following children are eligible to enroll under this paragraph:

(1) A child who is enrolled under paragraph A or B and whose family income at the end of the child's ~~6-month~~ 12-month enrollment term exceeds the maximum allowable income set in that paragraph; and

(2) A child who is enrolled in the Medicaid program and whose family income exceeds the limits of that program. The department shall terminate Medicaid coverage for a child who enrolls in the Cub Care program under this subparagraph.

Sec. A-6. 22 MRSA §§3174-Z and 3174-AA are enacted to read:

§3174-Z. Asset limits

In determining eligibility for medical assistance under the Medicaid program for all individuals and families subject to an asset test, the department shall exempt from consideration all assets exempt pursuant to program rule on January 1, 2001 and shall adopt rules to exempt from consideration certain assets in amounts and under terms the department determines to be reasonable and consistent with the purposes of the Medicaid program as provided in this section. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter II-A. The rules must provide exemptions for the following assets:

2 1. Second vehicle. A 2nd vehicle that is necessary for
3 employment, to secure medical treatment or to provide
4 transportation for essential daily activities or a vehicle that
5 has been modified for operation by or the transportation of a
6 person with a disability;

8 2. Certain retirement savings. An individual retirement
9 account, self-employed plan, tax sheltered annuity or Keogh or
10 comparable retirement account of an adult family member;

12 3. Life insurance. Life insurance policies covering a
13 family member;

14 4. Educational savings plans. Educational savings plans or
15 accounts reserved exclusively for educational purposes, including
16 postsecondary education, for a child or an adult; and

18 5. Savings. An amount up to \$8,000 for an individual and
19 up to \$12,000 for a household of more than one person.

22 **§3174-AA. Enrollment periods**

24 The department shall establish enrollment periods for
25 medical assistance as provided in this section. Prior to the end
26 of the enrollment period, the department shall determine
27 continuing eligibility for the next enrollment period and notify
28 the enrollee of the determination.

30 1. Children. In the Medicaid program and the Cub Care
31 program under section 3174-T, the enrollment period for children
32 under 19 years of age must be 12 months.

34 2. Adults. In the Medicaid program, the enrollment period
35 must be the longest period allowed by federal law or regulation
36 but may not exceed 12 months.

38 **Sec. A-7. Medicaid buy-in for persons with disabilities.** Before
39 January 1, 2002, the Department of Human Services shall amend the
40 rules regarding eligibility for persons with disabilities to
41 purchase coverage under the Medicaid program. The amended rules
42 must maintain the combined income eligibility limit of 250% of
43 the federal nonfarm income official poverty line for earned and
44 unearned income. The rules must remove any separate limitation
45 on unearned income. Rules adopted pursuant to this section are
46 routine technical rules as defined by the Maine Revised Statutes,
47 Title 5, chapter 375, subchapter II-A.

Sec. A-8. Appropriation. The following funds are appropriated from the General Fund to carry out the purposes of this Part.

	2001-02	2002-03
6 HUMAN SERVICES, DEPARTMENT OF		
8 Medical Care - Payments to Providers		
10 All Other		\$4,393,313
12 Provides funds for Medicaid		
14 coverage to noncategorically		
16 eligible adults with income		
18 up to 125% of federal nonfarm		
20 poverty levels.		
20 Medical Care - Payments to Providers		
22 All Other	\$763,883	1,249,949
24 Provides funds to increase		
26 the income eligibility for		
28 children in the Cub Care		
30 program from 200% to 250% of		
32 federal nonfarm poverty		
34 levels.		
32 Medical Care - Payments to Providers		
34 All Other	633,667	909,351
36 Provides funds to allow		
38 persons with disabilities,		
40 whose combined income is at		
42 or below 250% of federal		
44 nonfarm poverty levels, to		
46 purchase coverage in the		
48 Medicaid program.		
44 Medical Care - Payments to Providers		
46 All Other	206,170	295,866
48 Provides funds due to changes		

2 in the asset test used to
 3 determine eligibility for
 4 medical assistance under the
 Medicaid program.

6 **Low-cost Drugs to Maine's Elderly**

8	All Other	4,029,424	5,667,678
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10 Provides funds to add cancer
 11 as a disease category covered
 12 by the basic component of the
 elderly low-cost drug program.

14 **Bureau of Health**

16	All Other	10,000	10,000
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18 Provides funds to match
 20 available federal funding to
 21 promote the delivery of
 22 health care in rural areas of
 the State.

24 **Bureau of Health**

26	All Other	150,000	150,000
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28 Provides funds for
 30 school-based dental health
 31 screenings and dental
 32 sealants.

34 **Bureau of Medical Services**

36	Positions - Legislative Count	(2,000)	(6,000)
	Personal Services	66,027	221,334
38	All Other	94,854	100,896
40	Total	160,881	322,230

42 Provides funds for one
 43 Comprehensive Health Planner
 44 II position and one Health
 45 Services Consultant position
 46 in fiscal year 2001-02 and
 one Comprehensive Health
 48 Planner II position, one
 49 Health Services Consultant
 50 position, one Social Services

2 Program Specialist position,
 one Senior Medical Claims
 4 Adjuster position, one
 Management Analyst position
 and one Programmer Analyst
 6 position in fiscal year
 2002-03 and related operating
 8 costs associated with
 expanding the access to the
 10 Medicaid program.

12 Bureau of Family Independence

14	Positions - Legislative Count	(3.000)	(18.000)
	Personal Services	84,551	673,088
16	All Other	22,875	133,750
18	Total	<u>107,426</u>	<u>806,838</u>

20 Provides funds for 3 Family
 Independence Specialist
 22 positions in fiscal year
 2001-02 and 12 Family
 24 Independence Specialist
 positions, 2 Human Services
 26 Aide positions, one Family
 Independence Unit Supervisor
 28 position and 3 Clerk Typist
 III positions in fiscal year
 30 2002-03 and related operating
 costs associated with
 32 expanding the access to the
 Medicaid program.

34	DEPARTMENT OF HUMAN SERVICES		
36	TOTAL	<u>\$6,061,451</u>	<u>\$13,805,225</u>

38 **Sec. A-9. Allocation.** The following funds are allocated from
 the Federal Expenditures Fund to carry out the purposes of this
 40 Part.

42		2001-02	2002-03
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44 HUMAN SERVICES, DEPARTMENT OF

**46 Medical Care - Payments to
 Providers**

48	All Other		\$8,752,448
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50 Provides funds for the

2 federal match for Medicaid
 3 coverage to noncategorically
 4 eligible adults with income
 5 up to 125% of federal nonfarm
 6 poverty levels.

8 **Medical Care - Payments to
 Providers**

10 All Other \$1,513,985 2,490,175

12 Provides funds for the
 13 federal match to increase the
 14 income eligibility for
 15 children in the Cub Care
 16 program from 200% to 250% of
 17 federal nonfarm poverty
 18 levels.

20 **Medical Care - Payments to
 Providers**

22 All Other 1,255,901 1,811,627

24 Provides funds for the
 25 federal match to allow
 26 persons with disabilities
 27 whose combined income is at
 28 or below 250% of federal
 29 nonfarm poverty levels to
 30 purchase coverage in the
 31 Medicaid program.

34 **Medical Care - Payments to
 Providers**

36 All Other 408,620 589,432

38 Provides funds for the
 39 federal match due to changes
 40 in the asset test used to
 41 determine eligibility for
 42 medical assistance under the
 43 Medicaid program.

46 **Bureau of Medical Services**

48	Positions - Legislative Count	(2,000)	(5,000)
	Personal Services	66,027	221,334
50	All Other	94,854	100,896

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2	Total	160,881	322,230
4	Provides funds for one Social Services Program Manager position and one Senior Medical Claims Adjuster position in fiscal year 2001-02 and one Social Services Program Manager position, one Senior Medical Claims Adjuster position, one Medical Claims Evaluator position and one Planning and Research Associate position in fiscal year 2002-03 and related operating costs associated with expanding the access to the Medicaid program.		

22 Bureau of Family Independence

24	Positions - Legislative Count	(3.000)	(17.000)
	Personal Services	84,551	673,088
26	All Other	22,875	133,750
28	Total	107,426	806,838

30 Provides funds for 3 Family Independence Specialist positions in fiscal year 2001-02 and 12 Family Independence Specialist positions, one Human Services Aide position, 2 Family Independence Unit Supervisor positions and 2 Clerk Typist III positions in fiscal year 2002-03 and related operating costs associated with expanding the access to the Medicaid program.

44	DEPARTMENT OF HUMAN SERVICES		
46	TOTAL	\$3,446,813	\$14,772,750

48

PART B

2 **Sec. B-1. 22 MRS §258** is enacted to read:

4 **§258. Support for primary and preventive health care services**

6 The department shall maintain and expand health care access
7 for underserved populations using funds appropriated for these
8 purposes by the Legislature as provided in this section.

10 **1. Support for federally qualified health centers and**
11 **federally qualified look-alikes.** The department shall provide
12 support for the infrastructure of federally qualified health
13 centers and federally qualified look-alikes, utilizing \$1,700,000
14 appropriated in fiscal year 2001-02 and annually thereafter.
15 From this amount, funding must be utilized as follows:

16 A. One hundred fifty thousand dollars as the state Medicaid
17 match to contract for Medicaid outstationing services at
18 federally qualified health centers and federally qualified
19 look-alikes;

20 B. Three hundred seventy-five thousand dollars as the state
21 Medicaid match to provide incentives under Medicaid to
22 improve the quality of services and enhance the delivery of
23 preventive services at federally qualified health centers
24 and federally qualified look-alikes;

25 C. Eight hundred seventy-five thousand dollars to support
26 the primary care infrastructure of federally qualified
27 health centers providing health care services to underserved
28 populations; and

29 D. Three hundred thousand dollars to support the
30 infrastructure of federally qualified look-alikes that meet
31 standards set by the department.

32 **2. Supports for certain community-based, nonprofit**
33 **entities.** The department shall provide support for certain
34 community-based nonprofit entities as follows.

35 A. In fiscal year 2002-03 and annually thereafter, \$300,000
36 must be appropriated to maintain and expand access to health
37 care through programs that are community-based, nonprofit
38 entities that provide primary care services to underserved
39 populations regardless of the ability of the patient to pay
40 and that utilize a sliding fee scale for patients with
41 family income below 200% of the federal nonfarm income
42 official poverty line. These funds may not be expended
43 until the department has reported to the joint standing
44 committee of the Legislature having jurisdiction over health
45 care services.

2 and human services matters recommending the entities to be
provided funding and the amount of such funding.

4 B. In fiscal year 2002-03 and annually thereafter, \$200,000
must be appropriated to maintain and expand access to health
6 care through programs that are community-based, nonprofit
8 rural health clinics that provide primary care services to
underserved populations regardless of the ability of the
10 patient to pay and that utilize a sliding fee scale for
12 patients with family income below 200% of the federal
nonfarm income official poverty line. The department shall
determine which rural health clinics will be provided
14 funding and the amount of such funding.

16 3. Rulemaking. The department shall adopt rules to
implement this section. Rules adopted pursuant to this section
18 are routine technical rules as defined in Title 5, chapter 375,
subchapter II-A.

20 4. Restriction. Funding provided under this section may
22 not supplant other sources of funding.

24 **Sec. B-2. Appropriation.** The following funds are appropriated
from the General Fund to carry out the purposes of this Part.

26 **2001-02** **2002-03**
28 **HUMAN SERVICES, DEPARTMENT OF**

30 **Medical Care - Payments to**
32 **Providers**

34	All Other	\$150,000	\$150,000
36	Provides funds to contract		
38	for Medicaid outstationing		
40	services at federally		
	qualified health centers and		
	federally qualified		
	look-alikes.		

42 **Medical Care - Payments to**
44 **Providers**

46	All Other	375,000	375,000
48	Provides funds to improve the		
	quality of services and		
	enhance the delivery of		

2 services at federally
qualified health centers and
4 federally qualified
look-alikes.

6 **Bureau of Health**

8 All Other 875,000 875,000

10 Provides funds to support the
12 primary care infrastructure
of federally qualified health
14 centers providing health care
services to underserved
16 populations.

18 **Bureau of Health**

20 All Other 300,000 300,000

22 Provides funds to support the
infrastructure of federally
24 qualified look-alikes that
meet standards set by the
Department of Human Services.

26 **Bureau of Health**

28 All Other 300,000

30 Provides funds to maintain
32 and expand access to health
care through programs that
34 are community-based,
nonprofit entities that
36 provide primary care services
to underserved populations
38 regardless of the ability to
pay and that utilize a
40 sliding fee scale for
patients with families below
42 200% of federal poverty
guidelines. These funds may
44 not be expended until the
Department of Human Services
46 has reported to the Joint
Standing Committee on Health
48 and Human Services
recommending entities to be

provided funding and the amount of such funding.

2

4 Bureau of Health

6 All Other 200,000

8 Provides funds to maintain
 10 and expand access to health
 12 care programs that are
 14 community-based, nonprofit
 16 rural health clinics that
 18 provide primary care services
 20 to underserved populations
 22 regardless of the ability to
 24 pay and that utilize a
 26 sliding fee scale for
 patients with families below
 200% of federal poverty
 levels. The Department of
 Human Services shall
 determine which rural health
 clinics will be provided
 funding and the amount of
 such funding.

28 DEPARTMENT OF HUMAN SERVICES
TOTAL \$1,700,000 \$2,200,000

30 **Sec. B-3. Allocation.** The following funds are allocated from
 32 the Federal Expenditures Fund to carry out the purposes of this
 Part.

34 **2001-02 2002-03**

36 HUMAN SERVICES, DEPARTMENT OF

**38 Medical Care - Payments to
 Providers**

40 All Other \$297,294 \$298,833

42 Provides funds for the
 44 federal match to contract for
 46 Medicaid outstationing
 48 services at federally
 50 qualified health centers and
 federally qualified
 look-alikes.

Medical Care - Payments to Providers

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All Other	743,235	747,083
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6

Provides funds for the federal match to improve the quality of services and enhance the delivery of services at federally qualified health centers and federally qualified look-alikes.

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DEPARTMENT OF HUMAN SERVICES		
TOTAL	\$1,040,529	\$1,045,916

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PART C

20

Sec. C-1. Waiver application for noncategorically eligible adults.

22

By March 1, 2002, the Department of Human Services shall apply for a waiver from the federal Health Care Financing Administration to provide coverage for noncategorically eligible adults 20 to 64 years of age pursuant to the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph F. The department shall begin coverage under the waiver 3 months from the date of approval of the waiver by the Health Care Financing Administration.

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Sec. C-2. Waiver application for self-employed persons and sole proprietors and members of their immediate families.

32

The Department of Human Services shall apply for a waiver from the federal Health Care Financing Administration to provide coverage for self-employed persons and sole proprietors and members of their immediate families whose family income is less than 300% of the nonfarm income official poverty line under a portion of the Medicaid program to be known as the "self-employed program." Under the self-employed program, enrollees must pay premiums, copayments and deductibles sufficient to cover the costs of coverage and administrative expenses. The waiver application must provide that the self-employed program is self-sufficient and requires no funding from the State. The department may seek grants and foundation funding to assist in the establishment and operation of the self-employed program. The department may maximize the use of federal funds to support the program. The premium structure may provide for cross-subsidization from higher income enrollees in the program to assist lower income enrollees. In designing the program, the department shall convene meetings of interested parties, including, but not

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2 limited to, consumers, insurance carriers and health coverage
3 providers and employers. If a waiver is approved by the Health
4 Care Financing Administration, the department may not begin
5 providing coverage under the self-employed program prior to
6 obtaining legislative approval. A self-employed program
7 implemented pursuant to this section must sunset if state funding
8 is required for the operation of the program.

9
10 The department shall undertake a study of the feasibility of
11 extending health coverage benefits to individuals, employees and
12 employers in small businesses for whom commercial coverage is not
13 reasonably available. In conducting the study, the department
14 shall seek the participation of interested parties, including,
15 but not limited to, consumers, insurance carriers, health
16 coverage providers and employers. The department shall report to
17 the Joint Standing Committee on Health and Human Services by
18 March 1, 2002 on the results of the study.

19
20 **Sec. C-3. MaineCare program.** Beginning January 1, 2002, when
21 the Department of Human Services or other state departments print
22 new materials pertaining to the Medicaid program or the Cub Care
23 program, reference to the program must be stated as the MaineCare
24 program. Beginning July 1, 2002, the coverage that was provided
25 under the Medicaid program and the Cub Care program on June 30,
26 2002 will be provided under the new name, the MaineCare program.
27 Beginning July 1, 2002, all funding appropriated or allocated for
28 expenditure under the Medicaid program or the Cub Care program is
29 appropriated or allocated under the MaineCare program, all
30 contractual arrangements of the Medicaid program and the Cub Care
31 program remain in effect and all assets, liabilities and
32 responsibilities of the department with regard to the Medicaid
33 program and the Cub Care program are transferred to the MaineCare
34 program. Before January 1, 2002, the department shall report to
35 the Joint Standing Committee on Health and Human Services on
36 legislation and other action necessary to complete the transfer
37 of names of the Medicaid program and the Cub Care program. The
38 department is authorized to submit legislation to the Second
39 Regular Session of the 120th Legislature to complete the transfer
40 of names and functions to the MaineCare program.

41
42 **Sec. C-4. Appropriation.** The following funds are appropriated
43 from the General Fund to carry out the purposes of this Part.

44
45 **2001-02**
46 **HUMAN SERVICES, DEPARTMENT OF**
47
48 **Bureau of Medical Services**

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2 All Other \$100,000
4 Provides funds for the waiver design and
6 actuarial rate-setting costs associated with
8 applying for a waiver to provide Medicaid
10 coverage to self-employed persons and sole
12 proprietors and members of their immediate
14 families whose family income is less than
16 300% of federal poverty levels on a buy-in
18 basis and to study and report on the
20 feasibility of extending health coverage
22 benefits to those for whom commercial
24 coverage is not reasonably available.

Bureau of Medical Services

16 All Other 49,500
18 Provides funds to change the name of all
20 Medicaid and Cub Care programs to the
22 MaineCare program.

DEPARTMENT OF HUMAN SERVICES

24 **TOTAL** \$149,500

26 **Sec. C-5. Allocation.** The following funds are allocated from
28 the Federal Expenditures Fund to carry out the purposes of this
30 Part.

2001-02

HUMAN SERVICES, DEPARTMENT OF

Bureau of Medical Services

36 All Other \$100,000
38 Provides funds for the federal match for the
40 waiver design and actuarial rate-setting
42 costs associated with applying for a waiver
44 to provide Medicaid coverage to
46 self-employed persons and sole proprietors
48 and members of their immediate families
50 whose family income is less than 300% of
federal poverty levels on a buy-in basis and
to study and report on the feasibility of
extending health coverage benefits to those
for whom commercial coverage is not
reasonably available.

Bureau of Medical Services

2 All Other 49,500

4 Provides funds for the federal match to
6 change the name of all Medicaid and Cub Care
6 programs to the MaineCare program.

8 **DEPARTMENT OF HUMAN SERVICES**
9 **TOTAL** \$149,500'

10 Further amend the bill by inserting at the end before the
12 summary the following:

14 **FISCAL NOTE**

16 **2001-02 2002-03**

18 **APPROPRIATIONS/ALLOCATIONS**

20 General Fund \$7,910,951 \$16,005,225
22 Other Funds 4,636,842 15,818,666

24 **REVENUES**

26 Other Funds \$4,636,842 \$15,818,666

28 This bill includes General Fund appropriations totalling
30 \$7,910,951 and \$16,005,225 in fiscal years 2001-02 and 2002-03,
30 respectively, for the Department of Human Services to expand
32 access to health care. The bill also includes Federal
32 Expenditures Fund allocations totalling \$4,636,842 and
34 \$15,818,666 in fiscal years 2001-02 and 2002-03, respectively,
34 for the federal match associated with expanding access to health
36 care. In fiscal year 2003-04, which is the first full year of
36 implementation, the cost of this bill is expected to be
38 \$57,257,363, with the total General Fund cost estimated to be
38 \$24,049,215.

40 This bill includes a General Fund appropriation of
42 \$4,393,313 in fiscal year 2002-03 and a matching Federal
42 Expenditures Fund allocation of \$8,752,448 for the Medical Care -
44 Payments to Providers program within the Department of Human
44 Services to provide Medicaid coverage to noncategorically
46 eligible adults with income up to 125% of federal poverty levels.

48 This bill includes General Fund appropriations of \$763,883
48 and \$1,249,949 in fiscal years 2001-02 and 2002-03, respectively,
50 and matching Federal Expenditures Fund allocations in these years
50 of \$1,513,985 and \$2,490,175 for the Medical Care - Payments to

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2 Providers program to increase the income eligibility for children
in the Cub Care program from 200% to 250% of federal poverty
3 levels.

4
6 This bill includes General Fund appropriations of \$633,667
in fiscal year 2001-02 and \$909,351 in fiscal year 2002-03 and
7 matching Federal Expenditures Fund allocations of \$1,255,901 and
8 \$1,811,627, respectively, for the Medical Care - Payments to
9 Providers program to allow persons with disabilities whose
10 combined income is at or below 250% of federal poverty levels to
11 purchase coverage in the Medicaid program.

12
14 This bill includes General Fund appropriations of \$206,170
and \$295,866 in fiscal years 2001-02 and 2002-03, respectively,
15 and matching Federal Expenditures Fund allocations of \$408,620
16 and \$589,432 for the Medical Care - Payments to Providers program
17 due to changes in the asset test used to determine eligibility
18 for medical assistance under the Medicaid program.

20 This bill includes a General Fund appropriation of \$100,000
21 in fiscal year 2001-02 and the matching Federal Expenditures Fund
22 allocation of \$100,000 for the Bureau of Medical Services within
23 the Department of Human Services for the waiver design and
24 actuarial rate-setting costs associated with applying for a
25 waiver to provide Medicaid coverage for self-employed persons and
26 sole proprietors and members of their immediate families whose
27 family income is less than 300% of federal poverty levels on a
28 buy-in basis and to study and report on the feasibility of
29 extending health coverage benefits to individuals, employees and
30 employers in small businesses for whom commercial coverage is not
31 reasonably available.

32
34 This bill includes General Fund appropriations of \$4,029,424
and \$5,667,678 in fiscal years 2001-02 and 2002-03, respectively,
35 for the Low-cost Drugs to Maine's Elderly program within the
36 Department of Human Services to add cancer as a disease category
37 covered by the basic component of the elderly low-cost drug
38 program.

40 This bill includes General Fund appropriations of \$10,000 in
41 each of fiscal years 2001-02 and 2002-03 for the Bureau of Health
42 within the Department of Human Services to match available
43 federal funding to promote the delivery of health care in rural
44 areas of the State. The Bureau of Health will require additional
45 Federal Expenditures Fund allocations for the available federal
46 funding. The amounts can not be determined at this time.

48 The bill includes General Fund appropriations of \$150,000 in
each of fiscal years 2001-02 and 2002-03 for the Bureau of Health

within the Department of Human Services for school-based dental health screenings and dental sealants.

The bill includes General Fund appropriations of \$150,000 in each of fiscal years 2001-02 and 2002-03 and matching Federal Expenditures Fund allocations of \$297,294 and \$298,833 in fiscal years 2001-02 and 2002-03, respectively, for the Medical Care - Payments to Providers program to contract for Medicaid outstationing services at federally qualified health centers and federally qualified look-alikes.

This bill includes General Fund appropriations of \$375,000 in each of fiscal years 2001-02 and 2002-03 and matching Federal Expenditures Fund allocations of \$743,235 in fiscal year 2001-02 and \$747,083 in fiscal year 2002-03 for the Medical Care - Payments to Providers program to improve the quality of services and enhance the delivery of services at federally qualified health centers and federally qualified look-alikes.

This bill includes General Fund appropriations of \$875,000 in each of fiscal years 2001-02 and 2002-03 for the Bureau of Health within the Department of Human Services to support the primary care infrastructure of federally qualified health centers providing health care services to underserved populations.

This bill includes General Fund appropriations of \$300,000 in each of fiscal years 2001-02 and 2002-03 for the Bureau of Health within the Department of Human Services to support infrastructure of federally qualified look-alikes that meet standards set by the Department of Human Services.

This bill includes a General Fund appropriation of \$300,000 in fiscal year 2002-03 for the Bureau of Health within the Department of Human Services to maintain and expand access to health care programs that are community-based, nonprofit entities that provide primary care services to underserved populations.

This bill includes a General Fund appropriation of \$200,000 in fiscal year 2002-03 for the Bureau of Health to maintain and expand access to health care programs that are community-based, nonprofit rural health clinics that provide primary care services to underserved populations.

This bill includes General Fund appropriations of \$160,881 in fiscal year 2001-02 and \$322,230 in fiscal year 2002-03 for the Bureau of Medical Services within the Department of Human Services for one Comprehensive Health Planner II position and one Health Services Consultant position in fiscal year 2001-02; for one Comprehensive Health Planner II position, one Health Services Consultant position, one Social Services Program Specialist

position, one Senior Medical Claims Adjuster position, one
2 Management Analyst position and one Programmer Analyst position
in fiscal year 2002-03; and related operating costs associated
4 with expanding the access to the Medicaid program.

6 This bill includes General Fund appropriations of \$107,426
in fiscal year 2001-02 and \$806,838 in fiscal year 2002-03 for
8 the Bureau of Family Independence within the Department of Human
Services for 3 Family Independence Specialist positions in fiscal
10 year 2001-02; 12 Family Independence Specialist positions, 2
Human Services Aide positions, one Family Independence Unit
12 Supervisor position and 3 Clerk Typist III positions in fiscal
year 2002-03; and for related operating costs associated with
14 expanding the access to the Medicaid program.

16 This bill includes a General Fund appropriation of \$49,500
in fiscal year 2001-02 and a matching Federal Expenditures Fund
18 allocation of \$49,500 for the Bureau of Medical Services to
change the name of all Medicaid and Cub Care programs to the
20 MaineCare program.

22 This bill includes Federal Expenditures Fund allocations of
\$160,881 in fiscal year 2001-02 and \$322,230 in fiscal year
24 2002-03 for the Bureau of Medical Services within the Department
of Human Services for one Social Services Program Manager
26 position and one Senior Medical Claims Adjuster position in
fiscal year 2001-02; for one Social Services Program Manager
28 position, one Senior Medical Claims Adjuster position, one
Medical Claims Adjuster position, one Medical Claims Evaluator
30 position and one Planning and Research Associate position in
fiscal year 2002-03; and for related operating costs associated
32 with expanding the access to the Medicaid program.

34 This bill includes Federal Expenditures Fund allocations of
\$107,426 in fiscal year 2001-02 and \$806,838 in fiscal year
36 2002-03 for the Bureau of Family Independence within the
Department of Human Services for 3 Family Independence Specialist
38 positions in fiscal year 2001-02; 12 Family Independence
Specialist positions, one Human Services Aide position, 2 Family
40 Independence Unit Supervisor positions and 2 Clerk Typist III
positions in fiscal year 2002-03; and for related operating costs
42 associated with expanding the access to the Medicaid program.'

44
46 **SUMMARY**

This amendment is the majority report of the committee. It
48 replaces the bill. It contains a number of provisions to expand
access to health care. This amendment does the following.

COMMITTEE AMENDMENT "A" to H.P. 979, L.D. 1303

1. It provides eligibility for Medicaid coverage to noncategorically eligible adults with an income up to 125% of the federal nonfarm official poverty line under a federal waiver. It begins a process of applying for a waiver to provide Medicaid coverage to self-employed persons and sole proprietors and members of their immediate families below 300% of the nonfarm income official poverty line on a buy-in basis. This self-employed and sole proprietor provision may not take effect without legislative approval granted after the approval of the waiver by the Health Care Financing Administration. It directs the Department of Human Services to undertake a study regarding health coverage for individuals, employees and employers in small businesses.

2. It increases the income eligibility for children in the Cub Care program from 200% to 250% of the federal nonfarm official poverty line.

3. It provides for an enrollment period in the Cub Care program of 12 months.

4. It provides asset exemptions in the Medicaid program for adults for certain 2nd vehicles, certain retirement savings accounts, life insurance, educational savings and savings for an individual living alone of \$8,000 and for a household of \$12,000. The amendment requires the Department of Human Services to adopt rules regarding exempt assets.

5. It provides for 12-month enrollment periods in the Medicaid program for children and for adults to the extent possible under federal law or pursuant to a waiver.

6. It expands the basic component of the elderly low-cost drug program to cover cancer drugs. This means that prescription drugs for cancer will be provided to the consumer with a maximum copay of 20%.

7. It requires the Department of Human Services to amend the rules allowing persons with disabilities to purchase coverage in the Medicaid program. The rules must maintain combined income eligibility limits of 250% of the federal poverty line while removing a separate limit on unearned income.

8. It appropriates funds for dental health screenings and dental sealants of \$150,000 in each year.

9. It directs the Department of Human Services, Bureau of Health to undertake an initiative to expand access to primary and preventive health care. It appropriates \$1,700,000 in fiscal year 2001-02 and \$2,200,000 in fiscal year 2002-03 for the

COMMITTEE AMENDMENT "A" to H.P. 979, L.D. 1303

2 support of the federally qualified health centers, the federally
qualified health center look-alikes and certain rural health
4 clinics. Because some of this funding will be used for Medicaid
match to federal funds, the amendment also allocates matching
6 federal funding.

8 10. It appropriates \$10,000 in each year to be used as the
match for federal funds available for the Department of Human
10 Services, Bureau of Health, Office of Health, Data and Program
Management and funding for the Office for Rural Health and
12 Primary Care.

14 11. It renames the Medicaid and Cub Care programs the
MaineCare program.

16 12. It provides funding for the provisions of the amendment
and adds a fiscal note.