

MAINE STATE LEGISLATURE

The following document is provided by the
LAW AND LEGISLATIVE DIGITAL LIBRARY
at the Maine State Law and Legislative Reference Library
<http://legislature.maine.gov/lawlib>



Reproduced from scanned originals with text recognition applied
(searchable text may contain some errors and/or omissions)



120th MAINE LEGISLATURE

SECOND REGULAR SESSION-2002

Legislative Document

No. 2000

H.P. 1497

House of Representatives, December 26, 2001

Resolve, Directing the Department of Human Services to Apply for a Federal Waiver to Provide Medicaid Benefits to Uninsured Residents with a Diagnosis of Cancer.

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 203.

Received by the Clerk of the House on December 19, 2001. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint Rule 401.

Millicent M. MacFarland

MILLICENT M. MacFARLAND, Clerk

Presented by Representative SHIELDS of Auburn.
Cosponsored by Senator TURNER of Cumberland and
Representatives: LOVETT of Scarborough, NUTTING of Oakland, O'BRIEN of Augusta.

Sec. 1. Waiver application for Medicaid cancer program.

Resolved: That the Department of Human Services shall apply to the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services for a waiver to provide coverage limited to cancer under the Medicaid program. Coverage under a Medicaid cancer program must comply with the following terms.

1. Coverage must be available to a person who has:

A. A confirmed diagnosis of cancer by a qualified physician;

B. Resided in the State for at least 6 months prior to applying for coverage;

C. A gross family income at or below 400% of the federal poverty level; and

D. No health insurance or no insurance coverage that is adequate for the diagnosis or treatment of cancer.

Age, assets and family status may not be factors in determining eligibility.

2. The department shall adopt rules to implement the program. The rules must contain the following provisions.

A. Coverage is limited to the enrollee and does not include family members.

B. An enrollee must pay minimal copayments.

C. Coverage is limited to the diagnosis and treatment costs for cancer and treatment costs for medical care required as a result of cancer treatment and must last as long as the person is receiving treatment for cancer.

D. Coverage must include the costs for the diagnosis and treatment of cancer that were incurred within 3 months prior to the date of enrollment.

E. For an enrollee who has health coverage, coordination of benefits, subrogation of coverage or redirection of the premium payments must occur in order to decrease costs to the State. Medicaid rules regarding estate recovery apply to Medicaid expenditures incurred under the waiver.

F. Coverage must last as long as the enrollee is a resident of the State, is undergoing treatment and the program is operated by the State.

2 G. For the purposes of the Medicaid cancer program, health
care coverage that is inadequate for the treatment of cancer
4 is coverage that does not provide comprehensive coverage for
diagnosis and treatment or has a deductible of \$5,000 or
6 more for the person being covered.

8 H. An enrollee must be obligated to reimburse the State
from the estate of the enrollee for all benefit costs that
10 apply to Medicaid benefits for nursing facility care or
hospice care if the enrollee dies within 5 years.

12 3. Coverage may not begin under the Medicaid cancer program
until the waiver has been obtained from the Centers for Medicare
14 and Medicaid Services and the Legislature has approved the
operation of the program and appropriated funding for coverage in
16 the biennial budget.

18 4. Rules adopted pursuant to this resolve are routine
technical rules as defined by the Maine Revised Statutes, Title
20 5, chapter 375, subchapter II-A.

22 SUMMARY

24 This resolve directs the Department of Human Services to
26 apply for a waiver to establish a Medicaid cancer program.
Coverage under the program is limited to persons who have
28 inadequate health care coverage and covers only the diagnosis and
treatment of cancer. Coverage may not begin until the waiver has
30 been obtained from the federal Department of Health and Human
Services, Centers for Medicare and Medicaid Services and the
32 Legislature has approved the operation of the program and
appropriated funding for coverage in the biennial budget.

34