

MAINE STATE LEGISLATURE

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M
R. 019

L.D. 1919

DATE: 4-15-04

(Filing No. H-924)

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
121ST LEGISLATURE
SECOND SPECIAL SESSION

HOUSE AMENDMENT "K" to COMMITTEE AMENDMENT "A" to H.P. 1420, L.D. 1919, Bill, "An Act To Make Supplemental Appropriations and Allocations for the Expenditures of State Government and To Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2004 and June 30, 2005"

Amend the amendment by striking out all of part MMM and inserting in its place the following:

PART MMM

Sec. MMM-1. 22 MRSA §3174-FF is enacted to read:

§3174-FF. MaineCare Basic

1. Established. The MaineCare Basic program is established to deliver medically necessary health care services to adult members of the MaineCare program.

2. Rules. The department shall adopt rules to implement MaineCare Basic in accordance with this section. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

3. Services. The rules adopted pursuant to subsection 2 must provide for access to medically necessary services as provided in the federally approved Medicaid state plan. Benefits for certain services are limited as follows.

A. A member is eligible for speech therapy benefits if the member has been assessed to have rehabilitation potential and has been documented by a physician to have experienced a significant decline in ability to communicate orally, safely swallow or masticate. Speech therapy benefits must cover

10/18

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2 one initial evaluation of the member per provider per year
3 and one reevaluation every 6 months per provider. Speech
4 therapy benefits must cover outpatient therapy provided in
5 the home, independent practitioners' offices and speech and
6 hearing clinic sites.

7 B. A member is eligible for psychological services benefits
8 for individual and group counseling. Benefits for one or
9 both types of counseling combined are limited to a total of
10 16 one-hour visits per year.

11 C. A member is eligible for benefits for durable medical
12 equipment, prosthetics and orthotics for one pair of shoes
13 and one pair of inserts per year, medical supplies required
14 to meet standard daily needs and power wheelchairs for a
15 member who is nonambulatory and has a significant
16 neuromuscular disease or disorder.

17 D. A member is eligible for occupational and physical
18 therapy benefits provided by occupational and physical
19 therapists licensed under Title 32 and who are acting within
20 their scope of practice. Services of occupational and
21 physical therapists may be provided in all outpatient
22 settings, including the home. For services subject to this
23 paragraph, the department may require a member to have that
24 member's rehabilitation potential documented by a physician
25 and may limit treatment to:

26 (1) Treatment following an acute hospital stay for a
27 condition affecting range of motion, muscle strength
28 and physical functional abilities;

29 (2) Treatment after a surgical procedure performed for
30 the purpose of improving physical function; or

31 (3) Treatment in those situations in which a physician
32 has documented that the patient has in the preceding 30
33 days required extensive assistance in the performance
34 of one or more of the following activities of daily
35 living: eating, toileting, locomotion, transfer or bed
36 mobility.

37 The department may limit occupational and physical therapy
38 services benefits under this paragraph for palliative care
39 and maintenance of function to one visit per year to design
40 a plan of care and train the member or caretaker of the
41 member to implement the plan or to reassess the plan of care.

42 E. A member is eligible for benefits for chiropractic
43 services provided by a chiropractor licensed under Title
44 32.

32. Benefits under this paragraph may be limited by the
department by requiring a member to have that member's
rehabilitation potential documented by a physician.
Benefits may be limited to treatment as follows:

(1) Treatment for acute neuromuscular skeletal
conditions affecting range of motion, muscle strength
and physical functional abilities; or

(2) Treatment after a surgical procedure performed for
the purpose of improving physical function.

F. A member is eligible for benefits under the private duty
nursing and personal care program and waiver programs for
the physically disabled or elderly as long as those benefits
may be limited by reductions in units of service or by rate
reductions.

G. A member who is eligible for benefits under section
3174-G, subsection 1, paragraph F is eligible for benefits
under this section subject to the provisions of paragraphs A
to G and to additional rules limiting benefits as specified
in this paragraph.

(1) Benefits for inpatient hospital admissions are
limited to 2 per year, except that more admissions may
be approved through prior authorization by the
department. This subparagraph does not limit inpatient
hospital benefits for laboratory services, x-ray
services, prenatal care and mental health diagnoses.

(2) Benefits for outpatient visits to a hospital are
limited to 5 per year, except that more visits may be
approved through prior authorization by the
department. This subparagraph does not limit benefits
for visits for laboratory services, x-ray services,
prenatal care and mental health diagnoses.

(3) Benefits for brand-name prescription medications
are limited to 5 medications dispensed during the same
time period, except that benefits for additional
brand-name medications may be approved through prior
authorization by the department. In addition to the
brand-name limitation, as compared to members who are
eligible under other paragraphs of section 3174-G,
subsection 1, prescription medication benefits for
members who are eligible under paragraph F are limited
by stricter prior authorization requirements, increased
review of pharmacy use and a request for federal
permission to waive freedom of choice.

(4) A member who is eligible for benefits under section 3174-G, subsection 1, paragraph F begins coverage on the date that the department determines that the member is eligible.

Sec. MMM-2. Service limitation or rate reduction. Home Based Care Program benefits administered by the Department of Human Services may be limited by reductions in units of service or by rate reductions for fiscal year 2004-05 in order to achieve savings of \$466,666 in General Fund expenditures in the program budget.

Sec. MMM-3. Savings in MaineCare expenditures. The Department of Human Services is authorized to adopt routine technical rules in the MaineCare program in accordance with Title 22, section 3174-FF to achieve savings for the General Fund in the following amounts in fiscal year 2004-05: speech therapy, occupational therapy and physical therapy, \$297,714; chiropractic, \$80,873; durable medical equipment, \$350,000; prosthetics and orthotics, \$43,094; psychological services, \$125,740; private duty nursing and waiver programs for persons who are elderly or disabled, \$233,333; noncategorical members' inpatient care, \$482,374; noncategorical members' outpatient care, \$945,841; noncategorical members' prescription medications, \$200,000; and noncategorical members' prospective eligibility, \$560,859.

Sec. MMM-4. Appropriations and allocations. The following appropriations and allocations are made.

HUMAN SERVICES, DEPARTMENT OF

Long-term Care - Human Services 0420

Initiative: Deappropriates funds for home-based care program benefits administered by the Department of Human Services to reflect program limits to be achieved by reductions in units of services or by rate reductions.

General Fund	2003-04	2004-05
All Other	\$0	(\$466,666)
General Fund Total	\$0	(\$466,666)

Bureau of Medical Services 0129

Initiative: Appropriates and allocates funds for contractual services to implement changes in the MaineCare benefit package, establishment of medical criteria, performance of medical

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assessment activities, utilization review, increased prior
authorization and medical management.

4	General Fund	2003-04	2004-05
	All Other	\$0	\$1,000,000
6		<hr/>	<hr/>
	General Fund Total	\$0	\$1,000,000
8			
	Federal Expenditures Fund	2003-04	2004-05
10	All Other	\$0	\$1,000,000
12		<hr/>	<hr/>
	Federal Expenditures Fund Total	\$0	\$1,000,000

14 **Medical Care - Payments to Providers 0147**

16 Initiative: Deappropriates and deallocates funds to implement
18 MaineCare Basic for all adults.

18	General Fund	2003-04	2004-05
20	All Other	\$0	(\$8,129,086)
22		<hr/>	<hr/>
	General Fund Total	\$0	(\$8,129,086)
24			
	Federal Expenditures Fund	2003-04	2004-05
26	All Other	\$0	(\$15,210,237)
28		<hr/>	<hr/>
	Federal Expenditures Fund Total	\$0	(\$15,210,237)

30 **Medical Care - Payments to Providers 0147**

32 Initiative: Deappropriates and deallocates funds to implement
MaineCare Basic for childless adults.

34	General Fund	2003-04	2004-05
	All Other	\$0	(\$1,989,074)
36		<hr/>	<hr/>
	General Fund Total	\$0	(\$1,989,074)
38			
	Federal Expenditures Fund	2003-04	2004-05
40	All Other	\$0	(\$3,721,732)
42		<hr/>	<hr/>
	Federal Expenditures Fund Total	\$0	(\$3,721,732)

44 **HUMAN SERVICES, DEPARTMENT OF**
46 **DEPARTMENT TOTALS**

46		2003-04	2004-05
	GENERAL FUND	\$0	(\$9,584,826)
48	FEDERAL EXPENDITURES FUND	0	(17,931,969)
50		<hr/>	<hr/>
	DEPARTMENT TOTAL - ALL FUNDS	\$0	(\$27,516,795)

HOUSE AMENDMENT

Further amend the amendment by adding at the end before the
emergency clause the following:

PART FFFF

Sec. FFFF-1. Appropriations and allocations. The following
appropriations and allocations are made.

HUMAN SERVICES, DEPARTMENT OF

Medical Care - Payments to Providers 0147

Initiative: Provides funds for rehabilitation services benefits
for brain injury.

General Fund	2003-04	2004-05
All Other	\$0	\$1,500,000
General Fund Total	<hr/>	<hr/>
	\$0	\$1,500,000

Federal Expenditures Fund	2003-04	2004-05
All Other	\$0	\$2,806,632
Federal Expenditures Fund Total	<hr/>	<hr/>
	\$0	\$2,806,632

HUMAN SERVICES, DEPARTMENT OF		
DEPARTMENT TOTALS	2003-04	2004-05
GENERAL FUND	\$0	\$1,500,000
FEDERAL EXPENDITURES FUND	0	2,806,632
DEPARTMENT TOTAL - ALL FUNDS	<hr/>	<hr/>
	\$0	\$4,306,632'

Further amend the amendment by relettering or renumbering
any nonconsecutive Part letter or section number to read
consecutively.

SUMMARY

This amendment strikes the language that requires Maine Care
Basic to provide rehabilitation services benefits for brain

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injury. The amendment also appropriates \$1,500,000 for
rehabilitation services for brain injury.

SPONSORED BY: *Joanne Twomey*
(Representative TWOMEY)

TOWN: Biddeford

FISCAL NOTE REQUIRED
(See attached)

**121st Maine Legislature
Office of Fiscal and Program Review**

**LD 1919**

An Act to Make Supplemental Appropriations and Allocations for the Expenditures of State Government and to Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2004 and June 30, 2005

LR 2833(24)

Fiscal Note for House Amendment " " to Committee Amendment "A"

Sponsor: Rep. Twomey

Fiscal Note Required: Yes

Fiscal Note

	2003-04	2004-05
Net Cost (Savings)		
General Fund	\$0	\$1,500,000
Appropriations/Allocations		
General Fund	\$0	\$1,500,000
Federal Expenditures Fund	\$0	\$2,806,632
Revenue		
Federal Expenditures Fund	\$0	\$2,806,632

Fiscal Detail and Notes

This amendment will increase the General Fund cost of the bill by \$1,500,000 in fiscal year 2004-05. Based on the estimated year-end balances, a balanced budget is not maintained for the 2004-2005 biennium.