

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)

L.D. 468

DATE: 3.30.05

(Filing No. S-61)

Reproduced and distributed under the direction of the Secretary of the Senate.

STATE OF MAINE
SENATE
122ND LEGISLATURE
FIRST REGULAR SESSION

SENATE AMENDMENT "AA" to COMMITTEE AMENDMENT "A" to H.P. 343, L.D. 468, Bill, "An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2006 and June 30, 2007"

Amend the amendment by striking out all of Part ZZZ.

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

SUMMARY

This amendment removes the provision of the amendment that increases payment to critical access hospitals.

SPONSORED BY:

(Senator MARTIN)

COUNTY: Aroostook

FISCAL NOTE REQUIRED
(See attached)

SENATE AMENDMENT



122nd MAINE LEGISLATURE

LD 468

LR 2149(49)

An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2006 and June 30, 2007

Fiscal Note for Senate Amendment " " to Committee Amendment **AA **A****

Sponsor: Sen. Martin

Fiscal Note Required: Yes

Fiscal Note

Undetermined current biennium savings - Other Special Revenue Funds

	2005-06	2006-07
Net Cost (Savings)		
General Fund	\$0	\$0

Fiscal Detail and Notes

This amendment will have no net effect on General Fund appropriations and revenue and a balanced budget is maintained for the 2006-2007 biennium. The increase in critical access hospital payments in Part ZZZ was offset by a deallocation for other critical access hospital costs also funded out of hospital tax revenue.