

# MAINE STATE LEGISLATURE

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# 123rd MAINE LEGISLATURE

## FIRST REGULAR SESSION-2007

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Legislative Document

No. 1146

H.P. 839

House of Representatives, March 7, 2007

### An Act To Promote Healthy Practices for MaineCare Members

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

*Millicent M. MacFarland*  
MILLCENT M. MacFARLAND  
Clerk

Presented by Representative MILLS of Farmington.  
Cosponsored by Senator MARTIN of Aroostook and  
Representatives: FISCHER of Presque Isle, MILLETT of Waterford, PATRICK of Rumford,  
Senator: TURNER of Cumberland.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §3173-C, sub-§7**, as amended by PL 2003, c. 451, Pt. H, §1  
3 and affected by §3, is further amended to read:

4 **7. Copayments.** Notwithstanding any other provision of law, the following  
5 copayments per service per day are imposed and reimbursements are reduced, or both, to  
6 the following levels:

- 7 A. Outpatient hospital services, \$3;
- 8 B. Home health services, \$3;
- 9 C. Durable medical equipment services, \$3;
- 10 D. Private duty nursing and personal care services, \$5 per month;
- 11 E. Ambulance services, \$3;
- 12 F. Physical therapy services, \$2;
- 13 G. Occupational therapy services, \$2;
- 14 H. Speech therapy services, \$2;
- 15 I. Podiatry services, \$2;
- 16 J. Psychologist services, \$2;
- 17 K. Chiropractic services, \$2;
- 18 L. Laboratory and x-ray services, \$1;
- 19 M. Optical services, \$2;
- 20 N. Optometric services, \$3;
- 21 O. Mental health clinic services, \$2;
- 22 P. Substance abuse services, \$2;
- 23 Q. Hospital inpatient services, \$3 per patient day;
- 24 R. Federally qualified health center services, \$3 per patient day, effective July 1,  
25 2004; and
- 26 S. Rural health center services, \$3 per patient day.

27 The department may adopt rules to adjust the copayments set forth in this subsection.  
28 The rules may adjust amounts to ensure that, except as provided in subsection 8,  
29 copayments are ~~deemed~~ considered nominal in amount and may include monthly limits or  
30 exclusions per service category. The need to maintain provider participation in the  
31 Medicaid program to the extent required by 42 United States Code, Section  
32 1392(a)(30)(A) or any successor provision of law must be considered in any reduction in  
33 reimbursement to providers or imposition of copayments.

34 **Sec. 2. 22 MRSA §3173-C, sub-§8** is enacted to read:

1 **8. Increased copayments.** Notwithstanding any provision of this section to the  
2 contrary, beginning January 1, 2008, increased copayments per service per day are  
3 imposed and reimbursements are reduced, or both, as provided in this subsection.

4 A. The department shall adopt rules to increase the copayments of MaineCare  
5 members who smoke tobacco products, as defined in section 1580, miss  
6 appointments with health care practitioners, as defined in section 1711-C, subsection  
7 1, paragraph F, or misuse prescription drugs, which, for purposes of this paragraph,  
8 means using prescription drugs in a manner that is not in compliance with the  
9 instructions of the prescribing health care practitioner after the MaineCare member  
10 has been instructed in the proper use and warned against misuse on more than one  
11 occasion.

12 B. The rules adopted under paragraph A must double the copayment otherwise  
13 applicable to a MaineCare member described under paragraph A and make payment  
14 mandatory for the MaineCare member to obtain service under the MaineCare  
15 program.

16 C. Rules adopted pursuant to this subsection are routine technical rules as defined  
17 by Title 5, chapter 375, subchapter 2-A.

## 18 SUMMARY

19 This bill requires increased copayments that are mandatory for the MaineCare  
20 program beginning January 1, 2008 for members who smoke tobacco products, who miss  
21 appointments with health care practitioners without just cause or who misuse prescription  
22 drugs. The copayments are double the normal amount and are mandatory for the member  
23 to obtain MaineCare services. The bill requires the Department of Health and Human  
24 Services to adopt routine technical rules to impose the new copayments.