MAINE STATE LEGISLATURE

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124th MAINE LEGISLATURE

FIRST REGULAR SESSION-2009

Legislative Document

No. 1003

H.P. 691

House of Representatives, March 12, 2009

Resolve, Directing the Office of Program Evaluation and Government Accountability To Perform a Performance Evaluation and Cost-benefit Analysis of the Dirigo Health Program

Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

Millicent M. Macfarland MILLICENT M. MacFARLAND Clerk

Presented by Representative LEWIN of Eliot.

Cosponsored by Senator NASS of York and

Representatives: AUSTIN of Gray, BEAULIEU of Auburn, BICKFORD of Auburn, BROWNE of Vassalboro, BURNS of Whiting, CEBRA of Naples, CHASE of Wells, CLARK of Easton, COTTA of China, CRAY of Palmyra, CROCKETT of Bethel, CURTIS of Madison, CUSHING of Hampden, DAVIS of Sangerville, FLOOD of Winthrop, FOSSEL of Alna, GIFFORD of Lincoln, HAMPER of Oxford, HANLEY of Gardiner, HARVELL of Farmington, JOHNSON of Greenville, JOY of Crystal, McFADDEN of Dennysville, McKANE of Newcastle, MILLETT of Waterford, NASS of Acton, PINKHAM of Lexington Township, PRESCOTT of Topsham, RICHARDSON of Carmel, RICHARDSON of Warren, ROBINSON of Raymond, SARTY of Denmark, SAVIELLO of Wilton, STRANG BURGESS of Cumberland, TARDY of Newport, THIBODEAU of Winterport, THOMAS of Ripley, TILTON of Harrington, WEAVER of York, Senators: GOOLEY of Franklin, McCORMICK of Kennebec, MILLS of Somerset, RECTOR of Knox, ROSEN of Hancock, SMITH of Piscataquis.

1 2 3 4 5 6	Sec. 1. Office of Program Evaluation and Government Accountability to perform a performance evaluation and cost-benefit analysis of Dirigo Health Program. Resolved: That the Office of Program Evaluation and Government Accountability shall perform a performance evaluation and cost-benefit analysis of the Dirigo Health Program, referred to in this resolve as "the program," including the cost of privatizing the program; and be it further
8	Sec. 2. Scope of evaluation. Resolved: That the scope of the evaluation and analysis must be from the inception of the program to the present and include:
9	1. A line-item survey of:
10	A. The original legislative document;
11	B. All amendments;
12	C. All policies developed and implemented; and
13	D. All rulemaking;
14	2. All expenses including:
15	A. Office space, including supplies and furnishings;
16	B. All staffing, including personnel on loan from another state agency;
17	C. All salaries and benefits;
18	D. All personnel expenses including travel;
19	E. All incentives;
20	F. All providers of studies and services to the program; and
21	G. All legal expenses;
22 23	3. An estimate of the cost of providing coverage to the 2,600 to 2,800 previously uninsured single persons, married couples and unmarried couples with children;
24	4. An estimate of the state funds that would be saved by privatizing the program;
25	5. The cost of insurance providers from outside the State;
26 27	6. Whether a policyholder should be responsible for the policyholder's own interaction with a provider; and
28	7. Copayments; and be it further
29 30 31 32 33 34	Sec. 3. Report. Resolved: That the Office of Program Evaluation and Government Accountability shall submit a report that includes its findings and recommendations, including suggested legislation, to the Joint Standing Committee on Health and Human Services no later than December 2, 2009. The joint standing committee is authorized to submit legislation related to this report to the Second Regular Session of the 124th Legislature at the time of submission of the report

This resolve directs the Office of Program Evaluation and Government Accountability to conduct a performance evaluation and cost-benefit analysis of the Dirigo Health Program from its inception to the present, including studying all legislation, policies, rulemaking, expenses, estimates of the cost of covering the uninsured and of privatizing the program, costs of insurance providers from out of the State, interactions of policyholders with providers and copayments. This resolve requires a report to be submitted to the Joint Standing Committee on Health and Human Services by December 2, 2009.