

MAINE STATE LEGISLATURE

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DMG
R. 12
MAJ

L.D. 1840

Date: 4/5/12

Majority

(Filing No. H-912)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
125TH LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "A" to H.P. 1361, L.D. 1840, Bill, "An Act To Limit MaineCare Reimbursement for Methadone Treatment"

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

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

§3174-UU. Methadone reimbursement limitations

Effective January 1, 2013, reimbursement under the MaineCare program for methadone for the treatment of addiction to opiates as defined in Title 17-A, section 1101, subsection 7 is limited to a lifetime maximum of 24 months, except that reimbursement may be provided for longer than 24 months if prior authorization is received from the department.

The department shall adopt rules to implement this section. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. Prior to adopting rules under this section, the department shall seek input from stakeholders and experts in the field of substance abuse addiction and recovery, including, but not limited to, representatives of the Office of Substance Abuse and individuals with expertise in medication-assisted treatment.

Sec. 2. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY BDS)

Mental Health Services - Community Medicaid 0732

Initiative: Reduces funding from savings from limiting MaineCare reimbursement for methadone for the treatment of addiction to opioids to a lifetime maximum of 24 months with prior authorization beyond 24 months.

COMMITTEE AMENDMENT "A" to H.P. 1361, L.D. 1840

1	GENERAL FUND	2011-12	2012-13
2	All Other	\$0	(\$491,407)
3			
4	GENERAL FUND TOTAL	<u>\$0</u>	<u>(\$491,407)</u>

5 **Office of Substance Abuse - Medicaid Seed 0844**
6 Initiative: Reduces funding from savings from limiting MaineCare reimbursement for
7 methadone for the treatment of addiction to opioids to a lifetime maximum of 24 months
8 with prior authorization beyond 24 months.

9	GENERAL FUND	2011-12	2012-13
10	All Other	\$0	(\$141,733)
11			
12	GENERAL FUND TOTAL	<u>\$0</u>	<u>(\$141,733)</u>

13	HEALTH AND HUMAN SERVICES,		
14	DEPARTMENT OF (FORMERLY BDS)		
15	DEPARTMENT TOTALS	2011-12	2012-13
16			
17	GENERAL FUND	\$0	(\$633,140)
18			
19	DEPARTMENT TOTAL - ALL FUNDS	<u>\$0</u>	<u>(\$633,140)</u>

20 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)**
21 **Medical Care - Payments to Providers 0147**
22 Initiative: Reduces funding from savings from limiting MaineCare reimbursement for
23 methadone for the treatment of addiction to opioids to a lifetime maximum of 24 months
24 with prior authorization beyond 24 months.

25	GENERAL FUND	2011-12	2012-13
26	All Other	\$0	(\$730,977)
27			
28	GENERAL FUND TOTAL	<u>\$0</u>	<u>(\$730,977)</u>

29	FEDERAL EXPENDITURES FUND	2011-12	2012-13
30	All Other	\$0	(\$2,297,941)
31			
32	FEDERAL EXPENDITURES FUND TOTAL	<u>\$0</u>	<u>(\$2,297,941)</u>

1	HEALTH AND HUMAN SERVICES,		
2	DEPARTMENT OF (FORMERLY DHS)		
3	DEPARTMENT TOTALS	2011-12	2012-13
4			
5	GENERAL FUND	\$0	(\$730,977)
6	FEDERAL EXPENDITURES FUND	\$0	(\$2,297,941)
7			
8	DEPARTMENT TOTAL - ALL FUNDS	\$0	(\$3,028,918)
9	SECTION TOTALS	2011-12	2012-13
10			
11	GENERAL FUND	\$0	(\$1,364,117)
12	FEDERAL EXPENDITURES FUND	\$0	(\$2,297,941)
13			
14	SECTION TOTAL - ALL FUNDS	\$0	(\$3,662,058)
15			

16 **SUMMARY**

17 This amendment is the majority report of the committee. The amendment removes
 18 from the bill the requirement that methadone services reimbursed under the MaineCare
 19 program be accessed at the clinic closest to the home of the MaineCare member. The
 20 amendment removes from the bill the directive to the Department of Health and Human
 21 Services to review MaineCare transportation services because a similar directive was
 22 included by the committee in the committee amendment to L.D. 1694. The amendment
 23 adds to the routine technical rulemaking a requirement that the Department of Health and
 24 Human Services seek input for the prior authorization rules from stakeholders and experts
 25 in the field of substance abuse addiction and recovery, including, but not limited to,
 26 representatives of the Office of Substance Abuse and individuals with expertise in
 27 medication-assisted treatment. This amendment adds an appropriations and allocations
 28 section.

29 **FISCAL NOTE REQUIRED**

30 **(See attached)**



125th MAINE LEGISLATURE

LD 1840

LR 2680(02)

An Act To Limit MaineCare Reimbursement for Methadone Treatment

Fiscal Note for Bill as Amended by Committee Amendment "A" (H-912)

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

	FY 2011-12	FY 2012-13	Projections FY 2013-14	Projections FY 2014-15
Net Cost (Savings)				
General Fund	\$0	(\$1,364,117)	(\$2,728,232)	(\$2,728,232)
Appropriations/Allocations				
General Fund	\$0	(\$1,364,117)	(\$2,728,232)	(\$2,728,232)
Federal Expenditures Fund	\$0	(\$2,297,941)	(\$4,595,882)	(\$4,595,882)
Revenue				
Federal Expenditures Fund	\$0	(\$2,297,941)	(\$4,595,882)	(\$4,595,882)

Fiscal Detail and Notes

The General Fund savings associated with limiting MaineCare reimbursement for methadone for the treatment of addiction to opioids to a lifetime maximum of 24 months with prior authorization beyond 24 months is estimated to be \$1,364,117 in fiscal year 2012-13. The Federal Expenditures Fund share of the savings is estimated to be \$2,297,941 in fiscal year 2012-13.