

MAINE STATE LEGISLATURE

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Date: 4/15/14

majority

L.D. 390
(Filing No. H-840)

APPROPRIATIONS AND FINANCIAL AFFAIRS

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
126TH LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT "B" to H.P. 265, L.D. 390, Bill, "An Act To Restore MaineCare Coverage for Ambulatory Surgical Center Services"

Amend the bill in the emergency preamble in the 2nd whereas paragraph in the 3rd line (page 1, line 5 in L.D.) by striking out the following: "inpatient"

Amend the bill by striking out all of section 1 and inserting the following:

'Sec. 1. Rulemaking. The Department of Health and Human Services shall adopt rules for the reimbursement of ambulatory surgical centers under the MaineCare program that are identical in substance to the rules that were in effect on January 1, 2012. Rules adopted pursuant to this section must take effect by July 1, 2014 and are routine technical rules as defined by the Maine Revised Statutes, Title 5, chapter 375, subchapter 2-A.'

SUMMARY

This amendment removes from the emergency preamble the word "inpatient," which was included in the bill in error. This amendment removes the appropriations and allocations section and adds a requirement that the Department of Health and Human Services adopt routine technical rules regarding the reimbursement of ambulatory surgical centers to take effect by July 1, 2014.

FISCAL NOTE REQUIRED
(See attached)

COMMITTEE AMENDMENT



126th MAINE LEGISLATURE

LD 390

LR 1258(05)

An Act To Restore MaineCare Coverage for Ambulatory Surgical Center Services

Fiscal Note for Bill as Amended by Committee Amendment "B" (H-840)

Committee: Appropriations and Financial Affairs

Fiscal Note Required: Yes

Fiscal Note

Current biennium cost increase - General Fund
Potential current biennium savings - General Fund

Fiscal Detail and Notes

The bill as amended would restore MaineCare coverage for ambulatory surgical center services. It is assumed the fiscal impact of this bill, both any current biennium costs or potential savings, will be absorbed by the Department of Health and Human Services within existing budgeted resources.