MAINE STATE LEGISLATURE

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L.D. 649

Date: $5/2$	7/15	(Filing No. S-127)
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3	HEALTH AND HUMAN SERVICES
4	Reproduced and distributed under the direction of the Secretary of the Senate.
5	STATE OF MAINE
6	SENATE
7	127TH LEGISLATURE
8	FIRST REGULAR SESSION
9 10 11 12	COMMITTEE AMENDMENT "A" to S.P. 242, L.D. 649, "Resolve, Directing the Department of Health and Human Services To Modify Coverage for Eyeglasses for Children under the Provisions of the MaineCare Program and Review Certain Reimbursement Rates"
13	Amend the resolve by striking out the title and substituting the following:
14 15	'Resolve, To Ensure That MaineCare-eligible Children Have Equal Access to Providers of Dental, Hearing and Vision Services'
16 17	Amend the resolve by striking out everything after the title and before the summary and inserting the following:
18 19 20 21	'Sec. 1. Development of comprehensive strategy. Resolved: That the Department of Health and Human Services, referred to in this resolve as "the department," shall develop a comprehensive strategy to address inequality in access to providers of dental, hearing and vision services for children 17 years of age and under
22	who are eligible for MaineCare and to ensure that children eligible for MaineCare have

1. By geographic area and type of service, the level and scope of disparity in access;

the same access to these services as have children who have health insurance coverage

through the private market. As part of the development of the comprehensive strategy

2. Impediments to access;

required by this section, the department shall identify:

- 3. Options for equalizing access, including changes to reimbursement, administrative processes, education and outreach; and
 - 4. Potential pilot projects in underserved geographic areas; and be it further
- Sec. 2. Stakeholder input. Resolved: That, in developing the comprehensive strategy required in section 1, the department shall actively seek input from a broad range of interested parties, including, but not limited to, parents and caregivers; providers of dental, hearing and vision services; pediatric and family health care practitioners; representatives of the child advocacy community; and the statewide associations

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COMMITTEE AMENDMENT

COMMITTEE AMENDMENT " A" to S.P. 242, L.D. 649 representing physicians, osteopathic physicians, hospitals, federally qualified health 2 centers, audiologists, dentists, optometrists and eye physicians and surgeons; and be it 3 4 Sec. 3. Recommendations. Resolved: That the department shall submit the 5 comprehensive strategy developed pursuant to section 1, including any suggested 6 legislation, to the Joint Standing Committee on Health and Human Services by January 15, 2016. The Joint Standing Committee on Health and Human Services may report out 7 8 legislation to the Second Regular Session of the 127th Legislature based on the 9 comprehensive strategy submitted by the department.' 10 SUMMARY 11 This amendment replaces the resolve. The amendment requires the Department of 12 Health and Human Services, with input from stakeholders, to develop a comprehensive strategy to ensure that MaineCare-eligible children have the same access to providers of 13 14 dental, hearing and vision services as have children with private health insurance. The 15 amendment requires the department to submit the strategy and related recommendations

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FISCAL NOTE REQUIRED

to the Joint Standing Committee on Health and Human Services by January 15, 2016.

(See attached)



127th MAINE LEGISLATURE

LD 649

LR 406(02)

Resolve, Directing the Department of Health and Human Services To Modify Coverage for Eyeglasses for Children under the Provisions of the MaineCare Program and Review Certain Reimbursement Rates

Fiscal Note for Bill as Amended by Committee Amendment '\(\frac{1}{5} - 12 \)

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

The additional costs to the Department of Health and Human Services to develop a comprehensive strategy to address inequality in access to dental, hearing and vision services are expected to be minor and can be absorbed within existing budgeted resources.