

# MAINE STATE LEGISLATURE

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Date: 3-11-16

(Filing No. S-392)

**HEALTH AND HUMAN SERVICES**

Reproduced and distributed under the direction of the Secretary of the Senate.

**STATE OF MAINE**

**SENATE**

**127TH LEGISLATURE**

**SECOND REGULAR SESSION**

COMMITTEE AMENDMENT “ **A** ” to S.P. 571, L.D. 1473, “Resolve, To Increase Access to Opiate Addiction Treatment in Maine”

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

**Sec. 1. MaineCare reimbursement rates for outpatient opioid treatment.**

**Resolved:** That the Department of Health and Human Services shall amend its rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 65, Behavioral Health Services regarding the reimbursement rate paid to outpatient opioid treatment providers to increase the rate from \$60 to \$72 a week until December 31, 2017. The reimbursement rate must be reduced to \$60 a week beginning January 1, 2018. The department may amend its rules to increase the rates above the reimbursement rates specified in this section at any time. The department shall take all necessary actions to implement the reimbursement increase under this section; and be it further

**Sec. 2. Rate study. Resolved:**

That the Department of Health and Human Services shall contract with a 3rd-party consultant to conduct a rate study regarding the reimbursement rate paid to outpatient opioid treatment providers under its rule Chapter 101: MaineCare Benefits Manual, Chapter III, Section 65, Behavioral Health Services. The rate study must account for provider costs related to outpatient opioid treatment services. The Department of Health and Human Services shall ensure that the 3rd-party consultant conducting the study under this section invites the participation of stakeholders providing outpatient opioid treatment services. The Department of Health and Human Services shall report its progress and findings under this section to the joint standing committee of the Legislature having jurisdiction over health and human services matters no later than December 30, 2016. The committee may report out a bill related to the report to the First Regular Session of the 128th Legislature; and be it further

**Sec. 3. Appropriations and allocations. Resolved:**

That the following appropriations and allocations are made.

**HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)**

**Medical Care - Payments to Providers 0147**

**COMMITTEE AMENDMENT**

1 Initiative: Provides funding to increase the reimbursement rate paid to outpatient opioid  
2 treatment providers from \$60 to \$72 a week.

3	<b>GENERAL FUND</b>	<b>2015-16</b>	<b>2016-17</b>
4	All Other	\$0	\$568,471
5			
6	GENERAL FUND TOTAL	<u>\$0</u>	<u>\$568,471</u>

7	<b>FEDERAL EXPENDITURES FUND</b>	<b>2015-16</b>	<b>2016-17</b>
8	All Other	\$0	\$1,008,425
9			
10	FEDERAL EXPENDITURES FUND TOTAL	<u>\$0</u>	<u>\$1,008,425</u>
11			

12 **SUMMARY**

13 This amendment requires the Department of Health and Human Services to amend its  
14 rules to increase the reimbursement rate paid to outpatient opioid treatment providers to  
15 \$72 a week, rather than \$80 as provided in the resolve. The amended rule must increase  
16 the reimbursement rate to \$72 until December 31, 2017. On January 1, 2018, the  
17 reimbursement rate must return to \$60 a week. The department may choose to amend its  
18 rules to increase the reimbursement rates above the specified amounts at any time. The  
19 amendment also requires the Department of Health and Human Services to contract with  
20 a 3rd-party consultant to conduct a rate study of outpatient opioid treatment services that  
21 must be reported to the joint standing committee of the Legislature having jurisdiction  
22 over health and human services matters no later than December 30, 2016. The committee  
23 may report out a bill related to the report to the First Regular Session of the 128th  
24 Legislature. If the Legislature does not amend the reimbursement rate in response to the  
25 rate study, the reimbursement rate will return to \$60 per week on January 1, 2018. The  
26 amendment also adds an appropriations and allocations section.

27 **FISCAL NOTE REQUIRED**

28 (See attached)



# 127th MAINE LEGISLATURE

LD 1473

LR 2407(02)

## Resolve, To Increase Access to Opiate Addiction Treatment in Maine

Fiscal Note for Bill as Amended by Committee Amendment "A" S-39Z

Committee: Health and Human Services

Fiscal Note Required: Yes

### Fiscal Note

	FY 2015-16	FY 2016-17	Projections FY 2017-18	Projections FY 2018-19
<b>Net Cost (Savings)</b>				
General Fund	\$0	\$568,471	\$284,236	\$0
<b>Appropriations/Allocations</b>				
General Fund	\$0	\$568,471	\$284,236	\$0
Federal Expenditures Fund	\$0	\$1,008,425	\$504,212	\$0
<b>Revenue</b>				
Federal Expenditures Fund	\$0	\$1,008,425	\$504,212	\$0

#### Fiscal Detail and Notes

The bill includes a General Fund appropriation to the Department of Health and Human Services of \$568,471 in fiscal year 2016-17 to increase the reimbursement rate paid to outpatient opioid treatment providers from \$60 to \$72 a week. Federal Expenditures Fund allocations will also be required for the FMAP match.