

# MAINE STATE LEGISLATURE

The following document is provided by the  
**LAW AND LEGISLATIVE DIGITAL LIBRARY**  
at the Maine State Law and Legislative Reference Library  
<http://legislature.maine.gov/lawlib>



Reproduced from electronic originals  
(may include minor formatting differences from printed original)



# 128th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2017

---

Legislative Document

No. 1039

---

I.B. 2

House of Representatives, March 14, 2017

### An Act To Enhance Access to Affordable Health Care

---

Transmitted to the Clerk of the 128th Maine Legislature by the Secretary of State on March 13, 2017 and ordered printed.

A handwritten signature in cursive script that reads "Robert B. Hunt".

ROBERT B. HUNT  
Clerk

1 **Be it enacted by the People of the State of Maine as follows:**

2 **PART A**

3 **Sec. A-1. 22 MRSA §3174-G, sub-§1, ¶F**, as amended by PL 2011, c. 380, Pt.  
4 KK, §2, is further amended to read:

5 F. A person 20 to 64 years of age who is not otherwise covered under paragraphs A  
6 to E when the person's family income is below or equal to 125% of the nonfarm  
7 income official poverty line, ~~provided that as long as~~ the commissioner ~~shall adjust~~  
8 adjusts the maximum eligibility level in accordance with the requirements of the  
9 paragraph.

10 (2) If the commissioner reasonably anticipates the cost of the program to exceed  
11 the budget of the population described in this paragraph, the commissioner shall  
12 lower the maximum eligibility level to the extent necessary to provide coverage  
13 to as many persons as possible within the program budget.

14 (3) The commissioner shall give at least 30 days' notice of the proposed change  
15 in maximum eligibility level to the joint standing committee of the Legislature  
16 having jurisdiction over appropriations and financial affairs and the joint standing  
17 committee of the Legislature having jurisdiction over health and human services  
18 matters; ~~and~~

19 **Sec. A-2. 22 MRSA §3174-G, sub-§1, ¶G**, as enacted by PL 2011, c. 380, Pt.  
20 KK, §3, is amended to read:

21 G. A person who is a noncitizen legally admitted to the United States to the extent  
22 that coverage is allowable by federal law if the person is:

- 23 (1) A woman during her pregnancy and up to 60 days following delivery; or  
24 (2) A child under 21 years of age; ~~and~~

25 **Sec. A-3. 22 MRSA §3174-G, sub-§1, ¶H** is enacted to read:

26 H. No later than 180 days after the effective date of this paragraph, a person under 65  
27 years of age who is not otherwise eligible for assistance under this chapter and who  
28 qualifies for medical assistance pursuant to 42 United States Code, Section  
29 1396a(a)(10)(A)(i)(VIII) when the person's income is at or below 133% plus 5% of  
30 the nonfarm income official poverty line for the applicable family size. The  
31 department shall provide such a person, at a minimum, the same scope of medical  
32 assistance as is provided to a person described in paragraph E.

33 Cost sharing, including copayments, for coverage established under this paragraph  
34 may not exceed the maximum allowable amounts authorized under section 3173-C,  
35 subsection 7.

36 No later than 90 days after the effective date of this paragraph, the department shall  
37 submit a state plan amendment to the United States Department of Health and Human  
38 Services, Centers for Medicare and Medicaid Services ensuring MaineCare eligibility

1 for people under 65 years of age who qualify for medical assistance pursuant to 42  
2 United States Code, Section 1396a(a)(10)(A)(i)(VIII).

3 The department shall adopt rules, including emergency rules pursuant to Title 5,  
4 section 8054 if necessary, to implement this paragraph in a timely manner to ensure  
5 that the persons described in this paragraph are enrolled for and eligible to receive  
6 services no later than 180 days after the effective date of this paragraph. Rules  
7 adopted pursuant to this paragraph are routine technical rules as defined by Title 5,  
8 chapter 375, subchapter 2-A.

9 **Sec. A-4. Interim reporting.** Between the effective date of the Maine Revised  
10 Statutes, Title 22, section 3174-G, subsection 1, paragraph H and the dates of approval of  
11 the state plan amendment by the United States Department of Health and Human  
12 Services, Centers for Medicare and Medicaid Services necessary for implementation of  
13 Title 22, section 3174-G, subsection 1, paragraph H, the Department of Health and  
14 Human Services shall provide monthly reports to the joint standing committee of the  
15 Legislature having jurisdiction over health and human services matters and to the joint  
16 standing committee of the Legislature having jurisdiction over appropriations and  
17 financial affairs on the progress of implementation of that paragraph, any issues that  
18 might delay implementation or act as barriers to implementation and any possible  
19 solutions to those issues and barriers.

20 **Sec. A-5. Reporting on implementation status.** No later than one year after  
21 the effective date of the Maine Revised Statutes, Title 22, section 3174-G, subsection 1,  
22 paragraph H, the Commissioner of Health and Human Services shall report to the joint  
23 standing committee of the Legislature having jurisdiction over health and human services  
24 matters and to the joint standing committee of the Legislature having jurisdiction over  
25 appropriations and financial affairs on the status of implementation of Title 22, section  
26 3174-G, subsection 1, paragraph H, including information on enrollment, costs, revenues  
27 generated from the Federal Government and other revenues, anticipated state savings and  
28 other issues pertinent to implementation.

## 29 PART B

30 **Sec. B-1. Calculation and transfer of savings.** The Commissioner of Health  
31 and Human Services, the Commissioner of Corrections and any state agency that  
32 recognizes savings as a result of implementation of the Maine Revised Statutes, Title 22,  
33 section 3174-G, subsection 1, paragraph H shall report within 60 days prior to the end of  
34 the first 12 months of enrollment under the Maine Revised Statutes, Title 22, section  
35 3174-G, subsection 1, paragraph H to the joint standing committee of the Legislature  
36 having jurisdiction over health and human services matters, the joint standing committee  
37 of the Legislature having jurisdiction over appropriations and financial affairs and the  
38 joint standing committee of the Legislature having jurisdiction over criminal justice and  
39 public safety matters on the amount of General Fund savings and other savings resulting  
40 from coverage provided under that paragraph, including but not limited to savings to  
41 substance abuse and mental health programs; medical services provided to persons in the  
42 care and custody of, or upon release by, the Department of Corrections or a county jail or  
43 regional jail; reimbursement to cities and towns for general assistance provided under  
44 Title 22, chapter 1161; services provided for individuals 21 years of age or older and

1 under 64 years of age who are currently eligible for the MaineCare program under  
2 medically needy, spend-down criteria; services provided under the MaineCare program,  
3 Section 1115 Health Care Reform Demonstration for Individuals with HIV/AIDS;  
4 services provided for parents participating in family reunification activities under Title  
5 22, chapter 1071; an estimate of savings for services provided to individuals who  
6 previously would have pursued a disability determination to qualify for coverage;  
7 services provided to individuals awaiting a MaineCare program disability determination  
8 for whom the applications are subsequently granted; services provided under the State's  
9 breast and cervical cancer treatment program; and other programs in which savings are  
10 achieved. The report must include the amount of savings realized during the preceding  
11 fiscal year by service area or program and the amount of savings projected to be achieved  
12 during the remainder of that fiscal year and during the next fiscal year by service area or  
13 program.

14 **Sec. B-2. Reporting of revenue.** The Department of Administrative and  
15 Financial Services, Maine Revenue Services shall report to the joint standing committee  
16 of the Legislature having jurisdiction over appropriations and financial affairs no later  
17 than 60 days following the end of the first 12 months of enrollment under the Maine  
18 Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph H regarding any new  
19 revenues, including any increase in federal medical assistance payments resulting from  
20 coverage provided under Title 22, section 3174-G, subsection 1, paragraph H. Prior to  
21 the end of state fiscal year 2018-19, the State Controller shall transfer any savings  
22 amounts identified under this section to the MaineCare Stabilization Fund established  
23 under Title 22, section 3174-KK.

24 **Sec. B-3. Evaluation by legislative office.** Within 90 days after the end of the  
25 first 12 months of enrollment under the Maine Revised Statutes, Title 22, section 3174-G,  
26 subsection 1, paragraph H, the Office of Fiscal and Program Review shall independently  
27 review reports required pursuant to sections 1 and 2 of this Part and report to the joint  
28 standing committee of the Legislature having jurisdiction over appropriations and  
29 financial affairs and the joint standing committee of the Legislature having jurisdiction  
30 over health and human services matters on its determination of the savings and new  
31 revenue, if any, resulting from implementation of Title 22, section 3174-G, subsection 1,  
32 paragraph H. This report must also include information about the amount of federal  
33 funds received by the State as a result of coverage authorized under that paragraph.

34 **SUMMARY**

35 This initiated bill requires the State to provide federally approved Medicaid services  
36 through MaineCare to qualifying persons under 65 years of age with income equal to or  
37 below 133% plus 5% of the nonfarm income official poverty line.

38 The initiated bill requires the Department of Health and Human Services to prepare  
39 and submit to the Federal Government any state plan amendments, no later than 90 days  
40 after the effective date of the initiated bill, necessary to implement the provisions of the  
41 initiated bill. The initiated bill requires monthly reporting by the department to the  
42 appropriate joint standing committees of the Legislature on the status of a state plan  
43 amendment submission until such an amendment is approved and reporting on the status

1 of implementation of the expanded coverage under MaineCare and on the status of  
2 implementation and savings generated to state-funded programs as a result of the  
3 expanded coverage. It requires the Department of Administrative and Financial Services,  
4 Maine Revenue Services to report on revenues generated as a result of expanded  
5 coverage. It requires any savings to be transferred to the MaineCare Stabilization Fund  
6 prior to the end of fiscal year 2018-19. It requires the Office of Fiscal and Program  
7 Review to independently review these reports and report its findings to the appropriate  
8 joint standing committees of the Legislature.