MAINE STATE LEGISLATURE

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HEALTH AND HUMAN SERVICES

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

STATE OF MAINE

SENATE

128TH LEGISLATURE

FIRST REGULAR SESSION

COMMITTEE AMENDMENT "A" to S.P. 512, L.D. 1466, Bill, "An Act To Address Severe and Ongoing Shortfalls in the Funding of Direct Care Workers in Longterm Care Settings and To Establish the Commission To Study Long-term Care Workforce Issues"

Amend the bill in section 1 by striking out all of subsection 2 (page 1, lines 33 to 35 in L.D.) and inserting the following:

'2. Rate increases for fiscal year 2018-19 and thereafter. For the state fiscal year ending June 30, 2019 and each year thereafter, the MaineCare payment rates for personal care and related services under each of the provisions under this section calculated under subsection 1 must be increased by an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index.'

Amend the bill in section 2 by striking out all of subsection 2 (page 2, lines 8 to 11 in L.D.) and inserting the following:

- '2. Rate increases for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, the MaineCare payment rates attributable to wages and salaries for personal care and related services under each of the provisions under this section calculated under subsection 1 must be increased by an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index.
- 3. Rate study. Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for adult family care services, adult day services or homemaker services and the rates in the rate study have been implemented.'

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Amend the bill in section 3 by striking out all of subsection 2 (page 2, lines 30 to 41 in L.D.) and inserting the following:

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2. Rate increases for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, an additional extraordinary circumstance supplemental allowance must be made as required by section 34 of the Principles of Reimbursement for Nursing Facilities equal to the amount of an inflation adjustment costof-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index of the portion of each facility's prospective and final prospective rate that is attributable to wages and wage-related benefits in both the direct care cost component and the routine care cost component. This supplemental allowance must be provided as part of each facility's prospective rate, notwithstanding any otherwise applicable caps or limits on reimbursement. This supplemental allowance must also be allowed and paid at final audit to the full extent that the facility has reported increased costs for wages and wage-related benefits, notwithstanding any otherwise applicable caps or limits on reimbursement, including without limitation the amount of the supplemental allowance added to prospective payment rates.

3. Rate study. Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for nursing facilities and the rates in the rate study have been implemented.'

Amend the bill in section 4 by striking out all of subsection 2 (page 3, lines 17 to 29 in L.D.) and inserting the following:

- 2. Rate increase for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, additional reimbursement by a supplemental payment in the amount of an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index over the payment rate calculated under subsection 1 of the portion of the facility's per diem rate that is attributable to wages, wage-related benefits and workers' compensation must be added to the per diem rate until the department adjusts the direct care pricer, the routine limit and the personal care services limit, as applicable, to incorporate this increase going forward. This increase must be provided as part of each facility's per diem rate notwithstanding any otherwise applicable caps or limits on reimbursement. This supplemental payment must also be allowed and paid at final audit to the full extent that the facility has reported increased costs for wages, wage-related benefits and workers' compensation, notwithstanding any otherwise applicable caps or limits on reimbursement, including without limitation the amount of the supplemental payment added to prospective payment rates.
- 3. Rate study. Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for residential care facilities and the rates in the rate study have been implemented.'

COMMITTEE AMENDMENT " ${\cal A}$ " to S.P. 512, L.D. 1466

1 2	Amend the bill in section 5 in subsection 9 in the first line (page 5, line 30 in L.D.) by striking out the following: "October 15" and inserting the following: 'December 2'							
3	Amend the bill by inserting after section 5 the following:							
4 5	'Sec. 6. Appropriations and allocations. The following appropriations and allocations are made.							
6	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)							
7	Developmental Services - Community 0122							
8	Initiative: Provides appropriations for an increase to rates for certain services.							
9 10	GENERAL FUND All Other	2017-18 \$66,990	2018-19 \$96,465					
11	An other							
12	GENERAL FUND TOTAL	\$66,990	\$96,465					
13	Long Term Care - Office of Aging and Disability Services 0420							
14	Initiative: Provides appropriations for an increase to rates for certain services.							
15 16	GENERAL FUND All Other	2017-18 \$929,673	2018-19 \$1,421,378					
17 18	GENERAL FUND TOTAL	\$929,673	\$1,421,378					
19	Medical Care - Payments to Providers 0147							
20 21	Initiative: Provides appropriations and allocations for an increase to rates for certain services.							
22 23 24	GENERAL FUND All Other	2017-18 \$6,405,351	2018-19 \$9,585,335					
25	GENERAL FUND TOTAL	\$6,405,351	\$9,585,335					
26 27	FEDERAL EXPENDITURES FUND All Other	2017-18 \$20,085,327	2018-19 \$35,811,906					
28 29	FEDERAL EXPENDITURES FUND TOTAL	\$20,085,327	\$35,811,906					

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COMMITTEE AMENDMENT

COMMITTEE AMENDMENT " A " to S.P. 512, L.D. 1466

1 2 3	OTHER SPECIAL REVENUE FUNDS All Other	2017-18 \$773,294	2018-19 \$1,214,774				
4	OTHER SPECIAL REVENUE FUNDS TOTAL	\$773,294	\$1,214,774				
5	Nursing Facilities 0148						
6 7	Initiative: Provides appropriations and allocations for an increase to rates for certain services.						
8 9	GENERAL FUND All Other	2017-18 \$18,901,499	2018-19 \$24,563,125				
10 11	GENERAL FUND TOTAL	\$18,901,499	\$24,563,125				
12	OTHER SPECIAL REVENUE FUNDS	2017-18	2018-19				
13	All Other	\$1,661,427	\$2,609,923				
14 15	OTHER SPECIAL REVENUE FUNDS TOTAL	\$1,661,427	\$2,609,923				
16	PNMI Room and Board Z009						
17	Initiative: Provides appropriations for an increase to rates f	Initiative: Provides appropriations for an increase to rates for certain services.					
18 19	GENERAL FUND All Other	2017-18 \$1,031,058	2018-19 \$1,619,699				
20 21	GENERAL FUND TOTAL	\$1,031,058	\$1,619,699				
22. 23	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)						
24 25	DEPARTMENT TOTALS	2017-18	2018-19				
26	GENERAL FUND	\$27,334,571	\$37,286,002				
27	FEDERAL EXPENDITURES FUND	\$20,085,327	\$35,811,906				
28	OTHER SPECIAL REVENUE FUNDS	\$2,434,721	\$3,824,697				
29		040.074.610	Φ T (022 (05				
30 31	DEPARTMENT TOTAL - ALL FUNDS	\$49,854,619	\$76,922,605				
32	SUMMARY						
33 34	This amendment, which is the majority report of the cochanges to the bill.	ommittee, makes	the following				

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COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "A" to S.P. 512, L.D. 1466

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	1. Instead of the 10% increase proposed in the bill, the amendment provides that rate
2	increases for fiscal year 2018-19 for all services in the bill must be paid according to the
}	inflation adjustment cost-of-living percentage change to reimbursement in accordance
ļ	with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price
5	Index medical care services index.
ó	2. The amendment provides that rate increases for fiscal year 2019-20 and annually
7	thereafter for those services must be paid using the same adjustment as fiscal year 2018-
3	19 until a rate study has been completed by the Department of Health and Human
)	Services, conducted by a 3rd party and including the participation of providers, and the

- 3. It changes the date of the report from the Commission To Study Long-term Care Workforce Issues from October 15, 2017 to December 2, 2017.
 - 4. It adds an appropriations and allocations section.

rates in the rate study have been implemented.

FISCAL NOTE REQUIRED

(See attached)

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128th MAINE LEGISLATURE

LD 1466

LR 1387(02)

An Act To Address Severe and Ongoing Shortfalls in the Funding of Direct Care Workers in Longterm Care Settings and To Establish the Commission To Study Long-term Care Workforce Issues

> Fiscal Note for Bill as Amended by Committee Amendment "\" ($S - | \Theta \omega$) **Committee: Health and Human Services** Fiscal Note Required: Yes

Fiscal Note

Legislative Cost/Study

	FY 2017-18	FY 2018-19	Projections FY 2019-20	Projections FY 2020-21
Net Cost (Savings)				
General Fund	\$27,334,571	\$37,286,002	\$47,277,606	\$55,530,669
Appropriations/Allocations				
General Fund	\$27,334,571	\$37,286,002	\$47,277,606	\$55,530,669
Federal Expenditures Fund	\$20,085,327	\$35,811,906	\$47,987,727	\$61,827,858
Other Special Revenue Funds	\$2,434,721	\$3,824,697	\$4,993,336	\$6,161,975
Revenue				
Federal Expenditures Fund	\$20,085,327	\$35,811,906	\$47,987,727	\$61,827,858
Other Special Revenue Funds	\$2,434,721	\$3,824,697	\$4,993,336	\$6,161,975

Legislative Cost/Study

The general operating expenses of this study are projected to be \$2,750 in fiscal year 2017-18. The Legislature's proposed budget includes \$10,000 in fiscal year 2017-18 for legislative studies. Whether this amount is sufficient to fund all studies will depend on the number of studies authorized by the Legislative Council and the Legislature. The additional costs of providing staffing assistance to the study during the interim can be absorbed utilizing existing budgeted staff resources.

Fiscal Detail and Notes

The bill includes General Fund appropriations to the Department of Health and Human Services of \$27,334,571 in fiscal year 2017-18 and \$37,286,002 in fiscal year 2018-19 for an increase to rates for certain services. Federal Expenditures Fund allocations are also included for the FMAP match and Other Special Revenue Funds allocations for the healthcare provider tax and the service provider tax.

Additional costs to the Department of Labor related to the Commissioner or the commissioner's designee participating on the commission can be absorbed within existing budgeted resources.