MAINE STATE LEGISLATURE

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130th MAINE LEGISLATURE

FIRST REGULAR SESSION-2021

Legislative Document

No. 265

S.P. 114

In Senate, February 1, 2021

An Act To Provide Women Access to Affordable Postpartum Care

Received by the Secretary of the Senate on January 28, 2021. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator CARNEY of Cumberland.
Cosponsored by Representative TALBOT ROSS of Portland and
Senators: BREEN of Cumberland, BRENNER of Cumberland, CLAXTON of Androscoggin,
MOORE of Washington, Representatives: MEYER of Eliot, PERRY of Calais, WHITE of
Waterville.

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

- **Sec. 1. 22 MRSA §3174-G, sub-§1, ¶A,** as enacted by PL 1999, c. 731, Pt. OO, §1, is amended to read:
 - A. A qualified woman during her pregnancy and up to 60 days 12 months following delivery when the woman's family income is equal to or below 200% of the nonfarm income official poverty line;
- **Sec. 2. 22 MRSA §3174-G, sub-§1, ¶G,** as amended by IB 2017, c. 1, Pt. A, §2, is further amended to read:
 - G. A person who is a noncitizen legally admitted to the United States to the extent that coverage is allowable by federal law if the person is:
 - (1) A woman during her pregnancy and up to 60 days 12 months following delivery; or
 - (2) A child under 21 years of age; and
- Sec. 3. Federal Medicaid waivers or state plan amendments; cost neutrality. The Department of Health and Human Services shall, no later than January 1, 2022, submit requests for any waivers or state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services determined necessary in order to accomplish the purposes of this Act. The department shall take all reasonable and necessary steps to seek approval of the waiver or state plan amendment. The department shall demonstrate cost neutrality in the waiver or state plan amendment, including, but not limited to, using savings from premium tax credits on health insurance obtained through the health insurance marketplace for which MaineCare members receiving services under this Act would be eligible, savings on limited family planning coverage and any other source of savings.
- **Sec. 4. Funding.** In order to implement those sections of this Act that amend the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G, if the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services does not grant a waiver or state plan amendment under section 3, the Department of Health and Human Services shall use federal funds first, if allowable under federal law, and then shall use the General Fund.
- **Sec. 5. Rulemaking.** Within 180 days after receiving a decision regarding coverage by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services pursuant to a request in accordance with section 3, the Department of Health and Human Services shall adopt rules to implement the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. Upon adoption of the rules, the Commissioner of Health and Human Services shall notify the Secretary of State, the Secretary of the Senate, the Clerk of the House of Representatives and the Revisor of Statutes.
- **Sec. 6. Report.** The Department of Health and Human Services shall report quarterly to the joint standing committee of the Legislature having jurisdiction over health and human services matters, beginning April 1, 2022, on the department's progress in seeking a waiver or state plan amendment under section 3 until the process is complete. The joint

standing committee of the Legislature having jurisdiction over health and human services matters is authorized to report out a bill to the Legislature regarding each report.

Sec. 7. Contingent effective date. Those sections of this Act that amend the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G do not take effect until the adoption of rules pursuant to section 5.

6 SUMMARY

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This bill extends from 60 days to 12 months the period of time following delivery of a baby that a woman may be eligible for services under MaineCare. The bill directs the Department of Health and Human Services to submit a waiver or state plan amendment request no later than January 1, 2022 to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to implement the provisions of this legislation that extend MaineCare coverage to a woman following delivery of a baby from 60 days to 12 months. The department is required to take all reasonable and necessary steps to seek approval of the waiver or state plan amendment. In the event the waiver or state plan amendment is not granted, the department is directed to implement the coverage provisions using federal funds, if allowable, and then using the General Fund. The department is directed to adopt rules no later than 180 days after receiving a decision from the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services to approve or deny the waiver or state plan amendment. The department is required to report on a quarterly basis beginning April 1, 2022 to the joint standing committee of the Legislature having jurisdiction over health and human services matters its progress in seeking a waiver or state plan amendment until the process is complete. The committee is authorized to report out legislation related to each report.