

MAINE STATE LEGISLATURE

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Date: 6-1-21

(Filing No. H-287)

HEALTH AND HUMAN SERVICES

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
130TH LEGISLATURE
FIRST SPECIAL SESSION

COMMITTEE AMENDMENT "A" to H.P. 793, L.D. 1064, "An Act To Advance Palliative Care Utilization in the State"

Amend the bill by striking out everything after the enacting clause and inserting the following:

Sec. 1. 22 MRSA §3174-FFF is enacted to read:

§3174-FFF. Palliative care reimbursement

1. Reimbursement. The department shall provide reimbursement under the MaineCare program for palliative care for the entire interdisciplinary team as appropriate to the plan of care, regardless of setting, including hospitals, nursing homes, outpatient clinics and home care providers. For the purposes of this section, "palliative care" has the same meaning as in section 1726.

2. Rules. The department shall adopt rules to implement this section. The rules must include, but are not limited to, reimbursement policies and quality control measures that ensure and promote high-value palliative care under the MaineCare program. The department shall use national standards for quality palliative care in the development of the rules. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

3. Stakeholder group. The department shall periodically convene a stakeholder group that includes the Palliative Care and Quality of Life Interdisciplinary Advisory Council established in Title 5, section 12004-I, subsection 47-I and representatives of organizations representing palliative care, home care and hospice providers to advise the department on educational materials and outreach related to this section.

Sec. 2. Rulemaking; national standards. In developing rules pursuant to the Maine Revised Statutes, Title 22, section 3174-FFF, subsection 2, the Department of Health and Human Services shall consider national standards such as the Clinical Practice Guidelines for Quality Palliative Care developed by the National Coalition for Hospice and Palliative Care.

COMMITTEE AMENDMENT

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Sec. 3. State plan amendment. The Department of Health and Human Services shall submit to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services any state plan amendments necessary to implement the requirements of the Maine Revised Statutes, Title 22, section 3174-FFF.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

SUMMARY

This amendment replaces the bill and makes a number of changes to the bill.

1. It removes the section of the bill that standardizes delivery of palliative care.

2. It specifies that the Department of Health and Human Services must use national standards in developing a MaineCare methodology that reimburses for the interdisciplinary team. It specifies that the department must consider the Clinical Practice Guidelines for Quality Palliative Care developed by the National Coalition for Hospice and Palliative Care.

3. It requires the Department of Health and Human Services to periodically convene a stakeholder group to advise the department on educational materials and outreach so that providers of palliative care understand the reimbursement system and rules.

4. It requires the Department of Health and Human Services to submit any necessary state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services.

FISCAL NOTE REQUIRED
(See attached)



130th MAINE LEGISLATURE

LD 1064

LR 1160(02)

An Act To Advance Palliative Care Utilization in the State

Fiscal Note for Bill as Amended by Committee Amendment *Am (H-287)*

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Potential current biennium cost increase - General Fund

Fiscal Detail and Notes

This bill directs the Department of Health and Human Services to provide reimbursement under the MaineCare program for palliative care for the entire interdisciplinary team as appropriate to the plan of care, regardless of setting, including hospitals, nursing homes, outpatient clinics and home care providers. It also requires the department to adopt rules that support and standardize the delivery of palliative care in the State, including but not limited to strategies for the distribution of public educational documents and the distribution by health care providers of information regarding the availability of palliative care to patients. Mainecare currently covers most of the services that would be included in any bundled rate. However, the amount of a bundled rate cannot be determined without a comprehensive assessment of the various options available in developing an alternative payment model for palliative care.