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STATE OF MAINE DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES BUREAU OF THE BUDGET 58 STATE HOUSE STATION AUGUSTA, MAINE 04333-0058

KIRSTEN LC FIGUEROA
COMMISSIONER

BETH L ASHCROFT STATE BUDGET OFFICER

To: The Honorable Troy D. Jackson, President of the Senate

Members of the 129th Senate

The Honorable Sara Gideon, Speaker of the House Members of the 129th House of Representatives

From: Beth Ashcroft, State Budget Officer

Date: December 17, 2019 Subject: Federal Mandates

The State Budget Officer is required by 5 M.R.S.A., Section 1670, to submit a list, to all members of the Legislature, of any new laws, regulations, or other actions that may require the State to comply with any new federal mandate in the current biennium or the next biennium.

Attached please find the report of federal mandates as submitted from the various State departments and agencies.

If you should have any questions regarding this report, please do not hesitate to contact the Budget Office at (207) 624-7810.

Thank you

BLA/sao

Phone: (207) 624-7810

cc: Christopher Nolan, Director, OFPR

Kirsten LC Figueroa, Commissioner, DAFS

Elaine Apostola, Deputy Director ME State Law & Legislative Reference Library

Darek M Grant, Secretary of the Senate Robert B Hunt, Clerk of the House

3RD Floor, Burton M. Cross Building Fax: (207) 624-7826

PROGRAM NAME & ACCOUNT#	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE		FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
Office of Aging and Disability Services Central Office 01010A014001 & 01310A014001	Section 731 OAA	Older Americans Act: SUA Required to appoint a legal assistance developer by ACL		013	\$91,513	Ongoing
010,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medicaid Waiver for Other Related Conditions; 010,013 Z211 Devels Svcs Waiver- MaineCare	for Waivers, Provider Payment Reassignment,	Federal Centers for Medicare & Medicaid Services (CMS): The rule requires	3/17/2022	010, 013	unknown	Ongoing
	Office of Aging and Disability Services Central Office 01010A014001 & 01310A014001 010,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medical Waiver for Other Related Conditions; 010,013 Z211 Devels Svcs Waiver-	Office of Aging and Disability Services Central Office 01010A014001 & 01310A014001 O10,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medical Care Services; 010,013 Z217 Medical Care Services; 010,013 Z217 Medical Care Services; O10,013 Z217 Medical Care Services; O10,013 Z211 Devels Svcs Waivers-CMS-2249-F/CMS-CMS-2249-F/CMS-	NAME & FED THE PURPOSE OF THE MANDATE Office of Aging and Disability Services Central Office o1010A014001 & Section 731 OAA O10,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medicaid Waiver for Other Related Conditions; 010,013 Z211 Devels Svcs Waiver-CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-2249-F/CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS-	NAME & FED THE PURPOSE OF TATION DATE (DD-MM-YY) Office of Aging and Disability Services Central Office 01010A014001 & Section 731 OAA 010,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medicaid Waiver for Other Related Conditions; 010,013 Z211 Devels Svcs Waiver-CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS-CMS	NAME & FED THE PURPOSE OF TATION DATE (SEE ACCOUNT # CITE THE MANDATE THE MANDATE (DD-MM-YY) KEY) Office of Aging and Disability Services Central Office of 1010A014001 & 01010A014001 & 01310A014001 Section 731 OAA Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL Older Americans Act: SUA Required to appoint a legal assistance developer by ACL	NAME & FED THE PURPOSE OF TATION DATE (SEE AMOUNT # CITE THE MANDATE (DD-MM-YY) KEY) Office of Aging and Disability Services Central Office of 1010A014001 & Section 731 OAA 01010A014001 & Section 731 OAA 01010A014001 & Section 731 OAA 01310A014001 O10,013 Z218 Medicaid Waiver for Brain Injury Residential/Community Serv; 010,013 0147 Medical Care Services; 010,013 Z217 Medicaid Waiver for Other Related Conditions; 010,013 Z217 Medicaid Conditions; 010,013 Z211 Devels Svcs Waiver-CMS-2249-F/CMS-CMS-CMS-2249-F/C

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 020, 021, 024, 029, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 044, 045, 046, 047, 048, 049, 052, 053, 054, 055, 056, 057,058,059, 060, 061, 062, 063, 064, 065, 066, 067, 069, 070, 071, 072, 074, 075, 076, 077, 078, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 090, 091, 098, 099, 100

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- TATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
DHHS/OMS	N/A	Section 1004 of the SUPPORT for Patients and Communities Act	CMS released new guidance to states related to the use of prescription opioids by updating standard requirements for the Medicaid Drug Utilization Review (DUR) program. There were small system changes on the MaineCare Pharmacy side.	1/1/2020	N/A	N/A	N/A
DHHS/OMS	N/A	SUPPORT for Patients and Communities Act (P.L. 115-271)	Requires that states report behavioral health measures in the adult core set beginning with reports for FY 2024.	FFY 2024 (unknown exactly)			Unknown
DHHS/OMS MaineCare 0129	Section 12006 21st Century Cures Act	Electronic Visit Verification - For all Personal Care and Home Health Services the Mediciaid agency must implement an electronic system that verifites the date of service, location of service, type of service provided and who provided the services as well as the individual receiving the servie and start and end times of service for better accountability and tracking of service delivery.	7/1/2020		Annual operations costs - \$1.2M	SFY 202	
			Note: This was submitted last year, with an implementation date of 1/1/20. Maine was granted a good faith exemption until 1/1/21, but we plan to implement by 7/1/20.				

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 020, 021, 024, 029, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 044, 045, 046, 047, 048, 049, 052, 053, 054, 055, 056, 057,058,059, 060, 061, 062, 063, 064, 065, 066, 067, 069, 070, 071, 072, 074, 075, 076, 077, 078, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 090, 091, 098, 099, 100

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	TATION DATE	FUND (SEE KEY)	AMOUNT	STAT FISCA YEAR
RPC DDPC	RPC - Z21950 DDPC-Z22255	AND DESCRIPTION OF THE PROPERTY OF THE PARTY	AS Ligature Risk Policy, to mitigate suicide risk at psychiatric hospitals AS Ligature Risk Policy, to mitigate suicide risk at psychiatric hospitals	12/8/2017 12/8/2017	010 010	\$1,100,000 \$1,100,000	2019 2019 8 2020

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 020, 021, 024, 029, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 044, 045, 046, 047, 048, 049, 052, 053, 054, 055, 056, 057,058,059, 060, 061, 062, 063, 064, 065, 066, 067, 069, 070, 071, 072, 074, 075, 076, 077, 078, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 090, 091, 098, 099, 100

REV. 11/2/2018

DEPARTMENT OR AGENCY	PROGRAM NAME & ACCOUNT #	FED CITE	DESCRIPTION OF THE PURPOSE OF THE MANDATE	IMPLEMENT- TATION DATE (DD-MM-YY)	FUND (SEE KEY)	AMOUNT	STATE FISCAL YEAR
ACF	Forest Protection; 014-01A-Z232-54		ADS-B is a system in which electronic onboard equipment automatically broadcasts the location of the aircraft using a transponder on the aircraft	1/1/2020	014	\$60,000	2020
ACF	Forest Resource (Stewardship); 013 01A-Z233-52	CFDA 10.678 .	States required by USFS directive (17 May 2019) to identify Forest Stewardship Program Priority Areas; not more than 50% of total eligible lands may be designated.	5/17/2019	013		2020

FUND KEY: 010, 012, 013, 014, 015, 016, 017, 018, 019, 020, 021, 024, 029, 030, 031, 032, 033, 034, 035, 036, 037, 038, 039, 040, 041, 042, 043, 044, 045, 046, 047, 048, 049, 052, 053, 054, 055, 057,058,059, 060, 061, 062, 063, 064, 065, 066, 067, 069, 070, 071, 072, 074, 075, 076, 077, 078, 080, 081, 082, 083, 084, 085, 086, 087, 088, 089, 090, 091, 098, 099, 100