

MAINE STATE LEGISLATURE

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JOINT STANDING COMMITTEE ON HEALTH & HUMAN SERVICES

DEPARTMENT OF HUMAN SERVICES

LD 1614 PART 2 BUDGET BILL

FY 04 - 05

THIS FILE CONTAINS THE FOLLOWING:

Departmental Impact Forms

Testimony

Committee Recommendations

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Office of Management and Budget 0142

Account Number(s): 010-10A-0142-01 **Page # in Bill:** 38

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(3,500)</u>	<u>(3,600)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds to help offset the budget shortfall.

Description of Impact on Program(s) – BE SPECIFIC:

This savings in the Office of Management and Budget will be generated by a curtailment in travel and other miscellaneous administrative expenses.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Office of Management and Budget 0142

Account Number(s): 010-10A-0142-01 **Page # in Bill:** 79

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

General Fund		
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Appropriation or Allocation Increase / (Decrease):

General Fund	4,590 / (4,590)	4,777 / (4,777)
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Revenue or Balance Transfer Increase / (Decrease):

General Fund		
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Description of Initiative:

To provide for the transfer of All Other funds to Personal Services to fund approved reclassifications and range changes in the Office of Management and Budget account.

Description of Impact on Program(s) – BE SPECIFIC:

These funds are required to upgrade an Information System Support Specialist II position (# 00-2546) to Senior Information System Support Specialist in the Division of Technology Services.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) _____ (Yes) _____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Office of Management and Budget 0142

Account Number(s): 010-10A-0142-01 **Page # in Bill:** C-16

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>4,234 / (4,234)</u>	<u>5,670 / (5,670)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the transfer of All Other funds to Personal Services for the reclassifications of 2 Clerk Typist II positions to Account Clerk II positions and one Account Clerk I position to an Account Clerk II.

Description of Impact on Program(s) – BE SPECIFIC:

The Transfer of funds from All Other to Personal Services for the range changes of support positions within the Division of Financial Services' Accounts Payable Unit as approved by the Bureau of Human Resources. This small unit is responsible for processing approximately \$160,000,000 in bills annually.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) _____ (Yes) _____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: OMB Operations – Regional 0196

Account Number(s): 010-10A-0196-01 **Page # in Bill:** 38

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]

<u>General Fund</u>	<u>1.0</u>	<u>1.0</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>40,963</u>	<u>43,590</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide funds for the transfer of one Clerk Typist II position established in Public Law 2001, Chapter 450 from the Bureau of Family Independence – Central account to the OMB Operations - Regional account

Description of Impact on Program(s) – BE SPECIFIC:

Regional support services positions usually are located in the OMB – Regional account. This position was erroneously established in the BFI – Regional account per Chapter 450 “An Act to Increase Access to Health Care”.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) _____ (Yes) _____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: OMB Operations - Regional 0196

Account Number(s): 010-10A-0196-01 Page # in Bill: 80

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

General Fund		
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Appropriation or Allocation Increase / (Decrease):

General Fund	4,068 / (4,068)	2,861 / (2,861)
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Revenue or Balance Transfer Increase / (Decrease):

General Fund		
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Description of Initiative:

To provide for the transfer of All Other funds to Personal Services to fund approved reclassifications and range changes in the OMB Regional Operations account.

Description of Impact on Program(s) – BE SPECIFIC:

These funds are required to upgrade several clerical support positions in the Regional Operations account.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) _____ (Yes) _____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Community Services Center 0845

Account Number(s): 010-10A-0845-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(31,702)</u>	<u>(31,702)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to administrative curtailments within the Community Services Center operational account.

Description of Impact on Program(s) – BE SPECIFIC:

All Divisions within the Service Center will be impacted by reductions in funds available for supplies, printing, and in-state conferences and other miscellaneous administrative costs.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

One time cost saving reductions.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Purchased Social Services 0228

Account Number(s): 010-10A-0228-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(99,520)</u>	<u>(99,520)</u>
<u>Federal Funds</u>	<u>79,520</u>	<u>79,520</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to the transfer of three special needs contracts to the Social Services Federal Block Grant and the elimination of General Fund appropriation for a Family Preservation project that will be funded by a federal grant.

Description of Impact on Program(s) – BE SPECIFIC:

The transfer of contracts to the SSBG (Social Services Block Grant) funding equals \$79,520 each year and thus will not have any impact on services.

The Promoting Safe and Stable Families federal grant will cover the elimination of \$20,000 from the Family Preservation project allocation in the General Fund, thus will not affect the project as costs are covered.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes and No) (Yes and No)
(please explain below)

The contract transfer to the SSBG is one-time, while the Family Preservation Project federal funding is on going. One time cost saving reductions.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Child and Family Services – Central 0307

Account Number(s): 010-10A-0307-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>	<u>3.0</u>	<u>3.0</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>235,758</u>	<u>237,392</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation of funds due to the transfer of one Protective Intake Program Supervisor position and two Human Services Case Supervisor positions from the Bureau of Child and Family Services - Regional account.

Description of Impact on Program(s) – BE SPECIFIC:

These supervisory positions are in the statewide Child Protective Intake Unit located in central office and this transfer more appropriately reflects the proper funding source.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

Position switch between BCFS - Central and Regional is on-going.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Foster Care 0137

Account Number(s): 010-10A-0137-01 **Page # in Bill:** 39

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>86,268</u>	<u>117,313</u>
<u>Federal Funds</u>	<u>(86,268)</u>	<u>(117,313)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To adjust appropriations and allocations in the Maine Care and Foster Care programs, since the Federal Financial Participation rate will decline, thereby increasing the State's share from 33.78% in FY 02-03 to 33.94% in FY 03-04 and 33.99% in FY04-05.

Description of Impact on Program(s) – BE SPECIFIC:

The FFP (Federal Financial Participation) Rate will decline, thus the State of Maine's share will increase from 33.78% in fiscal year 2003, to 33.94% in fiscal year 2004, and 33.99% in fiscal year 2005.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Foster Care 0137

Account Number(s): 010-10A-0137-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	(147,450)	(147,450)
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to a reduction in the spring and fall clothing allowance for foster children as appropriated in the Foster Care account.

Description of Impact on Program(s) – BE SPECIFIC:

Children in Foster Care receive an average daily clothing allowance of \$2.55 a day plus a spring and fall clothing allotment. .

AGE:	FALL LUMP-SUM	SPRING LUMP- SUM	REGULAR ALLOWANCE	TOTAL:
Birth - 3 years	\$ 100.00	\$ 65.00	\$ 554.00	\$ 719.00
4 - 10 years	\$ 200.00	\$ 100.00	\$ 901.00	\$1,201.00
11 - 20 years	\$ 350.00	\$ 250.00	\$ 1,339.00	\$1,939.00

This reduction should be changed to (\$54,700) which would be approximately a 65% reduction in the lump sum bi-annual amounts when allocated over both Child Welfare and Foster Care accounts.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

One time reduction in clothing allowance
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**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Child Welfare Services 0139

Account Number(s): 010-10A-0139-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(293,815)</u>	<u>(293,815)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to a reduction in the spring and fall clothing allowance for foster children as appropriated in the Child Welfare Services account.

Description of Impact on Program(s) – BE SPECIFIC:

Children in Foster Care receive an average daily clothing allowance of \$2.55 a day plus a spring and fall clothing allotment.

AGE:	FALL LUMP-SUM	SPRING LUMP- SUM	REGULAR ALLOWANCE	TOTAL:
Birth - 3 years	\$ 100.00	\$ 65.00	\$ 554.00	\$ 719.00
4 - 10 years	\$ 200.00	\$ 100.00	\$ 901.00	\$1,201.00
11 - 20 years	\$ 350.00	\$ 250.00	\$ 1,339.00	\$1,939.00

This reduction should be changed to (\$386,565) which would be approximately a 65% reduction in the lump sum bi-annual amounts when allocated over both Child Welfare and Foster Care accounts.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

One time reduction in clothing allowance
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2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Child Welfare Services 0139

Account Number(s): 010-10A-0139-01

Page # in Bill: C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		(2,000,000)
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to a one-time reduction of Community Intervention Program funding and replaced with one-time Temporary Assistance for Needy Families (TANF) block grant funds in fiscal year 2004-05.

Description of Impact on Program(s) – BE SPECIFIC:

Does this Initiative have an impact on the 2006-2007 Biennium? (No) _____ (No) _____
(please explain below)

One time reduction in Community Intervention General Funds to be replaced by one-time TANF Block Grant Funds.

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Child Welfare Services 0139

Account Number(s): 010-10A-0139-01 **Page # in Bill:** C-17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(115,585)</u>	<u>(119,053)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds used as state match for cooperative agreements with the University of Southern Maine Muskie School. The in-kind match will come from the University.

Description of Impact on Program(s) – BE SPECIFIC:

The Muskie School engages in multiple Cooperative Agreements with DHS including the Department of Human Service Training Institute, Medicaid Reimbursement etc. These projects are funded primarily through federal funds using match from the University Budget and some state funds. In order to reduce the amount of state funds required to draw down the federal match, the Muskie School has identified percentages of salary of core staff, which can be used as match.

There will be no impact on the programs to be delivered. This is an increase in the in-kind match contributed by the university, which will result in a decrease in the amount of state funds required for the Child Welfare Services Training Institute (CWSTI).

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
 (please explain below)

This in-kind match can be on going.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Child and Family Services – Regional 0452

Account Number(s): 010-10A-0452-01 **Page # in Bill:** 39

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>11,318 / (11,318)</u>	<u>21,294 / (21,294)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer to funds to support the reorganization of 5 Protective Intake Worker to Human Service Caseworker, 1 Director Division Residential Care position to Public Service Manger II, 1 Director Division Adult Services Manger II and 1 Medical Care Coordinator to Comprehensive Health Planner I.

Description of Impact on Program(s) – BE SPECIFIC:

To fund the reorganization of 5 Protective Intake Workers to Human Services Caseworkers in the Bureau of Child and Family Services – Regional account.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Child and Family Services – Regional 0452

Account Number(s): 010-10A-0452-01 **Page # in Bill:** 80

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>2,080 / (2,080)</u>	<u>2,246 / (2,246)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer of All Other funds to Personal Services to fund approved reclassifications and range changes in the Bureau of Child and Family Services – Regional account.

Description of Impact on Program(s) – BE SPECIFIC:

These funds are required to upgrade a Human Services Aide II position (# 00-2717) to Human Services Aide III in the Bureau of Child and Family Services – Regional account.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Child and Family Services – Regional 0452

Account Number(s): 010-10A-0307-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

General Fund	(3.0)	(3.0)
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Appropriation or Allocation Increase / (Decrease):

General Fund	(235,758)	(237,392)
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Revenue or Balance Transfer Increase / (Decrease):

General Fund		
Federal Funds		
Other Special Revenue funds		
Other (please specify)		

Description of Initiative:

Provides for the deappropriation of funds due to the transfer of one Protective Intake Program Supervisor position and two Human Services Case Supervisor positions to the Bureau of Child and Family Services - Central account.

Description of Impact on Program(s) – BE SPECIFIC:

These supervisory positions are in the Statewide Child Protective Intake Unit located in central office and this transfer more appropriately reflects the proper funding source, based upon their Bureau-wide work activities.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

Position switch between BCFS - Central and Regional is on-going.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Child and Family Services – Regional 0452

Account Number(s): 010-10A-0452-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(88,333)</u>	<u>(88,333)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds in personal services due to the projected attrition rate and effect of the hiring freeze on this account.

Description of Impact on Program(s) – BE SPECIFIC:

The Department of Human Services gave up \$265,000 in General Fund salary savings. This is one of three accounts identified as historically having salary savings due to the turnovers in several professional and support services position classes.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Elder and Adult Services 0140

Account Number(s): 010-10A-0140-01 **Page # in Bill:** 39/40

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>9,173 / (9,173)</u>	<u>8,963 / (8,963)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer to funds to support the reorganization of 5 Protective Intake Worker to Human Service Caseworker, 1 Director Division Residential Care position to Public Service Manager II, 1 Director Division Adult Services Manager II and 1 Medical Care Coordinator to Comprehensive Health Planner I.

Description of Impact on Program(s) – BE SPECIFIC:

To fund the reorganization of the Director, Division of Residential Care to Public Service Manager II in the Bureau of Elder and Adult Services account.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Elder and Adult Services - Bureau of 0140

Account Number(s): 010-10A-0140-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>95,000</u>	<u>150,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation of funds for homemaker services.

Description of Impact on Program(s) – BE SPECIFIC:

Funds for Homemaker Services that were reduced in P.L. 2001 Chapter 20 are being restored.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Long Term Care - Human Services 0420

Account Number(s): 010-10A-0420-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>355,000</u>	<u>300,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation of funds for home-based care services.

Description of Impact on Program(s) – BE SPECIFIC:

The Home Based Care program currently has a waiting list of 700 +. These funds will allow approximately 88 new admissions, in addition to persons who can be admitted based on attrition from this program.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)

(please explain below)

If this funding carries into the next biennium.

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Long Term Care - Human Services 0420

Account Number(s): 010-10A-0420-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(100,000)</u>	<u>(100,000)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to savings in long term care assessments.

Description of Impact on Program(s) – BE SPECIFIC:

The de-appropriation is based on savings from not offering a face-to-face eligibility assessment in situations unless the person is expected to receive services within three months, because a person's condition may change such that an earlier assessment would no longer be valid.

Approximately 600 persons will be affected by the proposed change. These individuals will receive an extensive telephone intake screening and be offered referral to other community resources while they are on the waiting list for the program.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Long Term Care - Human Services 0420

Account Number(s): 010-10A-0420-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(220,000)</u>	<u>(220,000)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds by putting a cap on the time allowed for assistance with housekeeping tasks for Home Based Care consumers.

Description of Impact on Program(s) – BE SPECIFIC:

Cap time allowed for assistance with housekeeping tasks at 10 hours per month for Level I Home Based Care consumers and 12 hours for Level II consumers. The average time now is 13 and 15 hours per month respectively.

This change will affect 300+ current Home Based Care consumers who are receiving more hours monthly than the proposed new cap. Fewer hours will mean that families or friends will have to assume more responsibility for these tasks.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Long Term Care - Human Services 0420

Account Number(s): 010-10A-0420-01 **Page # in Bill:** C-18

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>100,000</u>	<u>100,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation of funds associated with re-establishing partial rate increases for MaineCare medical and remedial private duty nursing and personal care, elderly and adults with disabilities waiver, adult day health care and adult family care providers.

Description of Impact on Program(s) – BE SPECIFIC:

The funds for these rate increases were reduced in P.L. 2001 Chapter 20 and are partially being restored on a one-time basis for SFY 04-05. This represents the funds that will be needed to offer the same one-time rate increase to the Elder and Disabled Adults Home Based Care program as will be provided to the MaineCare Private Duty Nursing / Personal Care Services, Adult Day Health, and Elder and Adults with Disabilities waiver programs.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Health / Control Over Plumbing

Account Number(s): 010-10A-0143-01 / 014-10A-0205-01 **Page # in Bill:** 42/47

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(19,564)</u>	<u>(19,216)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>	<u>19,564</u>	<u>19,216</u>
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer of funds between accounts for 2 positions that are incorrectly charged, one Environmental Specialist IV position and one Sanitarian II position.

Description of Impact on Program(s) – BE SPECIFIC:

This modification will correct the funding sources for an Environmental Specialist IV (line #32-1811) located in the General Fund and a Sanitarian II (line # 00-2608) located in a Dedicated Revenue Fund. The Environmental Specialist IV works for the Control over Plumbing Program but is currently funded through licenses fees deposited in the General Fund for Eating and Lodging establishments. While the Sanitarian II works for the Eating and lodging Program but is currently funded through plumbing permit fees received by the Division of Health Engineering, Bureau of Health. These positions should be switched and the salary differential between these two positions will be a net savings in the General Fund.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

This is on going.

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Health - Bureau of 0143

Account Number(s): 010-10A-0143-01 **Page # in Bill:** C-19

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(300,000)</u>	<u>(300,000)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds allocated to Healthy Start Home Visitations by utilizing Fund for Healthy Maine Tobacco Evaluation funds for this purpose.

Description of Impact on Program(s) – BE SPECIFIC:

The loss of \$300,000 in Tobacco Evaluation funds from the Fund for a Healthy Maine will negatively affect the ability to measure the impact of the multiple tobacco-related initiatives of the Fund for a Healthy Maine. Examples of the type of data obtained through evaluation include: regular updating of data related to adult and youth smoking rate (including detailed analysis of Maine Behavioral Risk Factor Surveillance System and Maine Youth Risk Behavior Surveys as well as implementation and analysis of special Adult and Youth Tobacco Surveys, which occur every four years on a staggered schedule); analysis of consumption data (determined by tobacco sales); evaluation of the impact of the Healthy Maine Partnership Community/School grants, including monitoring and analysis of policy changes in local communities; evaluation of the reach and impact of tobacco media; overall evaluation of impact of all components of the tobacco control program, including tobacco treatment through the Maine Tobacco Help Line.

Evaluation of the success of Maine's comprehensive tobacco control efforts is important both to monitor program success but also to assist program managers in adjusting allocations and priorities to assure effectiveness. Tobacco advocates will likely view this transfer of funds as a step away from the State's commitment to tobacco prevention and control.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Health - Bureau of 0143

Account Number(s): 010-10A-0143-01 **Page # in Bill:** C-19

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>579,638</u>	<u>579,638</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>579,638</u>	<u>579,638</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation of funds to offset the costs of five Public Health Nurse I positions and two Public Health Nurse Supervisor positions in the Maternal and Child Health Block Grant. These positions will be funded by targeted case management revenue earned by these positions that by law has to be deposited in the General Fund as undedicated revenue.

Description of Impact on Program(s) – BE SPECIFIC:

Within the scope of Public Health Nursing practice, PHN has identified several areas of services that can generate revenue to contribute to funding program activities. They are as follows:

Targeted Case Management (TCM) - Many years ago PHN provided targeted case management services to the prenatal and pediatric Medicaid population. This was discontinued about 3 years ago, when it was identified that records would not satisfy an audit. Since that time, PHN has worked to put in place a clinical and electronic documentation system that will document services and contain the information needed by an audit. As of this time, PHN is prepared to resume billing for targeted case management, having worked with the Bureau of Medical Services to receive approval to provide TCM services. Targeted Case Management requires the 1/3 match of general funds. The match will be provided through PHN salaries paid by the general fund. This is a legitimate source of funding for some of the services provided by PHN and has already received approval as noted in the agreement between BMS and PHN.

Historically monies from the State General Fund and the Federal Maternal Child Health Block Grant have financed Public Health Nursing services. The federal grant is at maximum financial capacity and has dwindling funds available to support PHN services. In addition the State financial situation has resulted in significant ongoing reductions in funds available to support PHN services. We are to the point that if additional revenue is not available our nurses will sit at their desks and Maine residents will not receive services as there are no funds to support travel and materials needed for the provision of PHN services; the other option is to layoff nurses which will still result in a loss of services to Maine residents. The Public Health Nursing Program has been responsible and proactive in determining other revenue sources to support their service activities and to cover the reductions resulting from required cuts to the general fund allotments.

Does this Initiative have an impact on the 2006-2007 Biennium?

(Yes) (Yes)
(please explain below)

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**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Health - Bureau of 0143

Account Number(s): 010-10A-0143-01 **Page # in Bill:** C-21

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>	<u>(0.2)</u>	<u>(0.2)</u>
<u>Federal Funds</u>	<u>(2.5)</u>	<u>(2.5)</u>
<u>Other Special Revenue funds</u>	<u>(2.0)</u>	<u>(2.0)</u>
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(27,354)</u>	<u>(28,436)</u>
<u>Federal Funds</u>	<u>(184,944)</u>	<u>(193,595)</u>
<u>Other Special Revenue funds</u>	<u>(103,223)</u>	<u>(106,713)</u>
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deallocation of funds for one part time Public Health Nurse I position in the General Fund, two seasonal Chemist Assistant positions in the Health and Environmental Testing Lab's Other Special Revenue Fund account, one Nuclear Engineer Specialist position in the Other Special Revenue Fund account, a half-time Planning & Research Associate II position, one Nursing Education Consultant position, and one Public Health Veterinarian position in the Federal Project Grants account which will be given up in return for positions to support the Office of Public Health Emergency Preparedness and the Environmental Public Health Tracking Grant.

Description of Impact on Program(s) – BE SPECIFIC:

We have identified 8 positions that we could give up in exchange for having 8 new positions for public health emergency preparedness and the environmental health tracking grants.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: FHM Bureau of Health 0953

Account Number(s): 014-10A-0953-0 **Page # in Bill:** C-21

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u> FUND FOR A HEALTHY MAINE	300,000 / (300,000)	300,000 / (300,000)

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the reallocation of funds within the Bureau of Health Fund for a Healthy Maine, from the Healthy Maine Tobacco Evaluations program to the Healthy Start Home Visitations program.

Description of Impact on Program(s) – BE SPECIFIC:

The loss of \$300,000 in Tobacco Evaluation funds from the Fund for a Healthy Maine will negatively affect the ability to measure the impact of the multiple tobacco-related initiatives of the Fund for a Healthy Maine. Examples of the type of data obtained through evaluation include: regular updating of data related to adult and youth smoking rate (including detailed analysis of Maine Behavioral Risk Factor Surveillance System and Maine Youth Risk Behavior Surveys as well as implementation and analysis of special Adult and Youth Tobacco Surveys, which occur every four years on a staggered schedule); analysis of consumption data (determined by tobacco sales); evaluation of the impact of the Healthy Maine Partnership Community/School grants, including monitoring and analysis of policy changes in local communities; evaluation of the reach and impact of tobacco media; overall evaluation of impact of all components of the tobacco control program, including tobacco treatment through the Maine Tobacco Help Line.

Evaluation of the success of Maine's comprehensive tobacco control efforts is important both to monitor program success but also to assist program managers in adjusting allocations and priorities to assure effectiveness. This transfer of funds will likely be viewed by tobacco advocates as a step away from the State's commitment to tobacco prevention and control.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Family Independence – Central 0100

Account Number(s): 010-10A-0100-01 **Page # in Bill:** 47

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]

<u>General Fund</u>	<u>(1.0)</u>	<u>(1.0)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(40,963)</u>	<u>(43,590)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide funds for the transfer of one Clerk Typist II position established in Public Law 2001, chapter 450 from the Bureau of Family Independence – Central account to the OMB Operations - Regional account

Description of Impact on Program(s) – BE SPECIFIC:

Regional support services positions usually are located in the OMB – Regional account. This position was erroneously established in the BFI – Regional account per Chapter 450 "An Act to Increase Access to Health Care".

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Family Independence – Central 0100

Account Number(s): 010 / 013-10A-0100-01 **Page # in Bill:** 48

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]

<u>General Fund</u>	<u>(8.0)</u>	<u>(8.0)</u>
<u>Federal Funds</u>	<u>(7.0)</u>	<u>(7.0)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(416,316)</u>	<u>(441,010)</u>
<u>Federal Funds</u>	<u>(380,004)</u>	<u>(402,365)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer of funds appropriated and allocated in Public Law 2001, Chapter 450 for 12 Family Independence Specialists and 3 Family Independence Unit Supervisors from the Bureau of Family Independence – Central account to the Bureau of Family Independence – Regional account

Description of Impact on Program(s) – BE SPECIFIC:

Family Independence Specialist positions usually are located in the Bureau of Family Independence - Regional account. These positions was erroneously established in the BFI – Central account per Chapter 450 "An Act to Increase Access to Health Care".

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Family Independence – Regional 0453

Account Number(s): 010 / 013-10A-0453-01 **Page # in Bill:** 48

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]

<u>General Fund</u>	<u>8.0</u>	<u>8.0</u>
<u>Federal Funds</u>	<u>7.0</u>	<u>7.0</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>416,316</u>	<u>441,010</u>
<u>Federal Funds</u>	<u>380,004</u>	<u>402,365</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To provide for the transfer of funds appropriated and allocated in Public Law 2001, Chapter 450 for 12 Family Independence Specialists and 3 Family Independence Unit Supervisors from the Bureau of Family Independence – Central account to the Bureau of Family Independence – Regional account

Description of Impact on Program(s) – BE SPECIFIC:

Family Independence Specialist positions usually are located in the Bureau of Family Independence - Regional account. These positions was erroneously established in the BFI – Central account per Chapter 450 “An Act to Increase Access to Health Care”.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Family Independence – Regional 0453

Account Number(s): 010-10A-0453-01 **Page # in Bill:** C-22

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(88,333)</u>	<u>(88,333)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds in personal services due to the projected attrition rate and effect of the hiring freeze on this account.

Description of Impact on Program(s) – BE SPECIFIC:

The Department of Human Services gave up \$265,000 in General Fund salary savings. This is one of three accounts identified as historically having salary savings due to the turnovers in several support services position classes.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Medical Services 0129

Account Number(s): 010-10A-0129-01 **Page # in Bill:** C-22

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(88,334)</u>	<u>(88,334)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds in personal services due to the projected attrition rate and effect of the hiring freeze on this account.

Description of Impact on Program(s) – BE SPECIFIC:

The Department of Human Services gave up \$265,000 in General Fund salary savings. This is one of three accounts identified as historically having salary savings due to turnovers.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Medical Services 0129

Account Number(s): 010, 013 & 014-10A-0129-01 **Page # in Bill:** C-22

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>80,774 / (80,774)</u>	<u>81,978 / (81,978)</u>
<u>Federal Funds</u>	<u>727,367</u>	<u>738,698</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the transfer of funds for the continuation of 18.5 project positions established to assist at the Bureau of Medical Services backing up staff who are dedicated to working on the development of the Medicaid Claims Management System (MECMS) for the MaineCare Program. These positions will end by June 18, 2005.

Description of Impact on Program(s) – BE SPECIFIC:

These project support positions were established by financial order in fiscal year 2003. This is to request the continuation of the project positions beginning on June 8, 2003 to prevent the interruption in services. The Financial order language to set up the project positions states:

"The department recognizes the need to perform day-today work and at the same time complete the project to replace the existing Medicaid management Information System (MMIS) and achieve federal certification of the new computer system. Without the additional assistance provided by these project positions there will be delays in claims processing, third party recoveries, scanning, and computer project completion resulting in complaints and cost overruns. It should be noted that there is a 90% federal matching rate for the project positions."

Continued

Does this Initiative have an impact on the 2006-2007 Biennium?

(No)
(No)

(please explain below)

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2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Bureau of Medical Services 0129

Account Number(s): 010, 013 & 014-10A-0129-01 **Page # in Bill:** C-22

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>100,000</u>	
<u>Federal Funds</u>	<u>750,000</u>	
<u>Other Special Revenue funds</u>	<u>400,000</u>	
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds, from a disencumbered prior year General Fund contract that will lapse back to the General Fund and Certificate of Need (CON) funds used for state match, for the continuation of the development and implementation of the Medicaid Claims Management System (MECMS) for the MaineCare Program.

Description of Impact on Program(s) – BE SPECIFIC:

The Department of Human Services (DHS) requires \$500,000 to complete the MECMS project in FY04; replace the functions on the DHS WELFRE system; and replace the MaineCare voice response system.

DHS restructured the MECMS project to deliver the absolute minimum required system for federal system certification, but still requires \$200,000 to complete the project. DHS also uses other software on the same computer system that contains the current Medicaid claims processing system. DHS must replace this "gap" in capability before deactivating the DHS WELFRE system. The estimated state cost to replace this remaining critical software is \$250,000. Finally, DHS has competitively selected a vendor to provide MaineCare voice response services to replace the current leased system. The current voice response system is no capable of accessing MECMS. The net cost difference to activate this system in FY 04 is \$50,000. On-going service costs in future years is equal to the current system lease cost.

DHS proposes to fund the state \$500,000 portion of these projects in two ways. First, allocating \$400,000 from the Certificate of Need other special revenue in the Bureau of Medical Services (BMS) account. Second, un-encumber \$100,000 from the NL Partners media account and re-encumber the money towards the MECMS contract.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Bureau of Medical Services 0129

Account Number(s): 010, 013 & -10A-0129-01 **Page # in Bill:** C-22

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(350,000)</u>	<u>(350,000)</u>
<u>Federal Funds</u>	<u>(350,000)</u>	<u>(350,000)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and deallocation of funds due to savings from long term care assessments.

Description of Impact on Program(s) – BE SPECIFIC:

This represents savings from eliminating re-assessments of 4,400 long-stay nursing home residents whose conditions are not expected to improve, and for whom discharge is unlikely.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Bureau of Medical Services 0129

Account Number(s): 010-10A-0129-01 **Page # in Bill:** 16

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Sec. P-4. Lapsed Balances. Notwithstanding any other provision of law, \$100,000 of encumbered balance forward in fiscal year 2002-2003 in the Bureau of Medical Services, General Fund account in the Department of Human Services will be disencumbered and this amount lapses to the General Fund in fiscal year 2002-03.

Description of Impact on Program(s) – BE SPECIFIC:

The Department of Human Services (DHS) requires \$500,000 to complete the MECMS project in FY04; replace the functions on the DHS WELFRE system; and replace the MaineCare voice response system.

The MECMS project began in 2001 with adequate state appropriation to complete the core project and approval from the Centers for Medicare and Medicaid Services (CMS) to match the state funding contribution at an average 85% federal participation rate. In early FY03, \$821,000 of state funds was "released" from the MECMS project with full expectation of restoration in FY04. DHS restructured the MECMS project to deliver the absolute minimum required system for federal system certification, but still requires \$200,000 to complete the project.

DHS also uses other software on the same computer system that contains the current Medicaid claims processing system. DHS must replace this "gap" in capability before deactivating the old system. The estimated state cost to replace this remaining critical software is \$250,000.

Finally, DHS has competitively selected a vendor to provide MaineCare voice response services to replace the current leased system. These services will activate with the implementation of MECMS. The current voice response system is not capable of accessing MECMS. The net cost difference to activate this system in FY04 is \$50,000. Ongoing service costs in future years is equal to the current system lease cost.

continued

DHS proposes to fund the state \$500,000 portion of these projects in two ways. First, de-appropriate \$400,000 from the Certificate of Need section of the Bureau of Medical Services (BMS) account and appropriate it to the General Administrative section of the BMS account. Second, un-encumber \$100,000 from the NL Partners media account and re-encumber the money towards the MECMS contract.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) _____ (No) _____
(please explain below)

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**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care Payments to Providers 0147

Account Number(s): 010-10A-0147-01 **Page # in Bill:** 48/49

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(5,248,527)</u>	<u>(5,530,561)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and transfer of MaineCare funds from the Department of Human Services to the Department of Behavioral and Developmental Services for services for in-home support services.

Description of Impact on Program(s) – BE SPECIFIC:

These services have historically been seeded and managed by the Department of Human Services. The two Departments have determined that in-home support services are a behavioral health policy area and should be transferred to the Department of Behavioral and Developmental Services. This transfer will allow for better coordination of service and better outcomes.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care Payments to Providers 0147

Account Number(s): 010 / 013/ 014 /015-10A-0147-01 **Page # in Bill:** 49

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>1,277,428</u>	<u>1,786,552</u>
<u>Federal Funds</u>	<u>(2,318,067)</u>	<u>(3,329,985)</u>
<u>Other Special Revenue funds</u>	<u>13,090</u>	<u>20,206</u>
<u>Other (please specify)</u> <u>Federal Block Grant</u>	<u>(25,292)</u>	<u>(34,475)</u>

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To adjust appropriations and allocations in the Maine Care and Foster Care programs, since the Federal Financial Participation rate will decline, thereby increasing the State's share from 33.78% in FY02-03 to 33.94% in FY 03-04 and 33.99% in FY 04-05.

Description of Impact on Program(s) – BE SPECIFIC:

The FFP (Federal Financial Participation) Rate will decline, thus the State of Maine's share will increase from 33.78% in fiscal year 2003, to 33.94% in fiscal year 2004, and 33.99% in fiscal year 2005.

Does this Initiative have an impact on the 2006-2007 Biennium?

(Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care Payments to Providers 0147

Account Number(s): 010-10A-0147-01 **Page # in Bill:** 49/50

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(3,786,812)</u>	<u>(4,396,942)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and transfer of MaineCare funds from the Department of Human Services to the Department of Behavioral and Developmental Services for services to individuals who are Eligible for Maine Care.

Description of Impact on Program(s) – BE SPECIFIC:

The non-categorical or childless adult MaineCare Waiver that was passed into law in 2002 put the entire Mainecare seed into the Medical Care Payments to Providers account. This item transfers the seed for the services traditionally managed by the Department of behavioral and Developmental Services to that Department. This transfer will allow for better coordination of service and better outcomes.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care Payments to Providers 0147

Account Number(s): 010-10A-0147-01 **Page # in Bill:** 50

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(1,736,372)</u>	<u>(2,395,271)</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u> <u>Federal Block Grant</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Adjusts appropriations and allocations based on reprojections of expenditures.

Description of Impact on Program(s) – BE SPECIFIC:

The original projections were based on September 2002 data. Based on current analysis, the projected expenditures for SFY 04 and SFY 05 demonstrate savings to the General Fund of \$1,736,732 and \$2,395,271 respectively.

Does this Initiative have an impact on the 2006-2007 Biennium?

Yes____ Yes____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 Page # in Bill: C-23

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(1,000,000)</u>	<u>(1,000,000)</u>
<u>Federal Funds</u>	<u>1,946,376</u>	<u>1,946,376</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and allocation of funds due to a revenue maximization change in the method MaineCare reimburses Private Non-Medical Institutions (PNMI) as a fee for service instead of paying a portion of their budget.

Description of Impact on Program(s) – BE SPECIFIC:

This initiative changes the way certain Private Non-Medical Institutions are paid. This is a revenue maximization effort. MaineCare currently pays these PNMI using a rate that identifies several cost components. Under the new payment system, MaineCare would pay the facility on a fee for service basis that would not distinguish among cost components. This change will allow MaineCare to obtain federal reimbursement for some costs that now are paid with all state dollars. It is a continuation of an effort begun last year to maximize federal reimbursement in this program.

This is a revenue maximization effort that does have an impact on clients and providers. It will not affect the number of persons eligible, or the amount of monthly personal needs funds they may retain.

This proposal would require the provider to take available income from clients to cover "room and board costs" at the facility. The client is currently paying these costs to the State, so there is no fiscal impact to the client.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) _____ (Yes) _____
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-23

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(2,000,000)</u>	
<u>Federal Funds</u>	<u>(3,892,752)</u>	
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation of funds due to the retroactive recovery of funds associated with the Mental Health Parity law.

Description of Impact on Program(s) – BE SPECIFIC:

This initiative is due to the retroactive recovery of funds associated with the Mental Health Parity Bill signed into law during this Legislative Session.

The Part 1 Budget booked savings associated with recoveries due to the new law, as well as recoveries allowable under the old law. This item is associated with retroactive billing of insurance companies under the old law, and will be done for the previous 8 fiscal quarters.

There is no impact on programs or clients associated with this initiative.

This item will have a significant impact on insurance companies doing business in Maine. All estimates of premium increases were based upon the calculations in the bill, which did not calculate any retroactive recoveries.

There is also some question as to whether insurance companies will challenge the billing and force the State to litigate for the retroactive claims, because they were not calculated in the bill.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-23

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>250,000</u>	<u>250,000</u>
<u>Federal Funds</u>	<u>486,594</u>	<u>486,594</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>650,000</u>	<u>650,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds required to increase reimbursement rates for municipally owned hospitals thereby maximizing revenue so that these facilities would transfer funds to the State through an Intergovernmental Transfer (IGT).

Description of Impact on Program(s) – BE SPECIFIC:

This initiative is similar to the revenue maximization effort involving the Barron Center and the City of Portland, where the State increases payments to a municipally funded facility and the municipality transfers funding to the State through an Intergovernmental Transfer. This proposal would involve Mayo Regional Hospital in Dover-Foxcroft, Penobscot Valley Hospital in Lincoln, and Cary Medical Center in Caribou. This proposal will have no impact on programs or clients; it is simply a revenue maximization effort.

The proposal will impact the following groups:

- The three affected hospitals will have to agree to support the budget language requiring them to make the Intergovernmental Transfer.
- The Federal Government will have to approve the new rates for the three affected hospitals, but this will be part of the overall rate restructuring and should not present a problem.

Note: This proposal would keep MaineCare under the Hospital Upper Payment Limit, but would bring the program closer to the UPL.

Does this Initiative have an impact on the 2006-2007 Biennium?

(Yes)

(Yes)

(please explain below)

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**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Interdepartmental Transfer

Account Number(s): Sec. P-3 **Page # in Bill:** 16

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>650,000</u>	<u>650,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Sec. P-3. Interdepartmental transfer. The Commissioner of Administrative and Financial Services shall annually establish the amount that must be transferred from Mayo Regional Hospital in Dover-Foxcroft, Penobscot Valley Hospital in Lincoln, and Cary Medical Center in Caribou as an intergovernmental transfer. The amounts that must be transferred to the State as undedicated General Fund revenue from these municipally-funded facilities must be at least \$650,000 in fiscal year 2003-04 and must be at least \$650,000 in fiscal year 2004-05

Description of Impact on Program(s) – BE SPECIFIC:

This initiative is similar to the revenue maximization effort involving the Barron Center and the City of Portland, where the State increases payments to a municipally funded facility and the municipality transfers funding to the State through an Intergovernmental Transfer. This proposal would involve Mayo Regional Hospital in Dover-Foxcroft, Penobscot Valley Hospital in Lincoln, and Cary Medical Center in Caribou. This proposal will have no impact on programs or clients; it is simply a revenue maximization effort.

Continued

The proposal will impact the following groups:

- The three affected hospitals will have to agree to support the budget language requiring them to make the Intergovernmental Transfer.
- The Federal Government will have to approve the new rates for the three affected hospitals, but this will be part of the overall rate restructuring and should not present a problem.

Note: This proposal would keep MaineCare under the Hospital Upper Payment Limit, but would bring the program closer to the UPL.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)

(please explain below)

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**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-23

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>750,000</u>	<u>750,000</u>
<u>Federal Funds</u>	<u>1,459,782</u>	<u>1,459,782</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>2,250,000</u>	<u>2,250,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds required for the additional hospital / Anthem Insurance exchange for University employees.

Description of Impact on Program(s) – BE SPECIFIC:

This proposal would extend the section of the Part I Budget that raised MaineCare hospital rates and made a corresponding reduction in hospital rates paid by the State Employee health Program (through Anthem) to the University of Maine System Employee Health Plan.

As was the case with the State Employee Health Program, there will be no loss of employee benefits or net financial impact to Maine hospitals. There is similar language to that used for the State Employee Health Plan that appears later in this bill.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-23

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>700,000</u>	<u>700,000</u>
<u>Federal Funds</u>	<u>1,362,615</u>	<u>1,362,429</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds associated with re-establishing partial rate increases for MaineCare medical and remedial private non-medical institutions, private duty nursing and personal care, elderly and adults with disabilities waiver, adult day health care and adult family care providers that were reduced in P.L. 2001 chapter 51.

Description of Impact on Program(s) – BE SPECIFIC:

This retroactive rate increase that was eliminated in chapter 51 amounted to \$1,614,000 in fiscal year 2003 \$1,400,000 is being added back in over a two year period. Approximately \$1.2 million will be allocated to Medical and Remedial PNMI and Adult Family Care Homes. The balance will be used for MaineCare home care program. The difference between the \$1.6 mil. and the \$1.4 mil. is being appropriated to the Home Based Care account to provide for the same one-time supplemental rate increases for that program.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-24

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(200,000)</u>	<u>(200,000)</u>
<u>Federal Funds</u>	<u>(389,275)</u>	<u>(389,275)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and deallocation of funds due to a reduction in the Physician Incentive Program (PIP) payments.

Description of Impact on Program(s) – BE SPECIFIC:

This reduction requires MaineCare to save an additional \$200,000 in SFY 04 and SFY 05. The Department proposes to meet this reduction by reducing the Primary Care Physician Incentive Payment (PCPIP) by another 20% on top of the 50% (\$500,000) reduction in P.L.2001 Chapter 20. The PCPIP is distributed on a quarterly basis to an average of 640 primary care providers with payment ranging between \$900.00 and \$2200.00 depending upon the specialty of the primary care provider. 30% of the original payment will remain \$270 - \$660.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-24

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>300,000</u>	<u>300,000</u>
<u>Federal Funds</u>	<u>583,912)</u>	<u>583,912</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds to partially re-establish the scope of adult transportation services and the rates paid for adult transportation reduced in P.L. 2001 chapter 20.

Description of Impact on Program(s) – BE SPECIFIC:

In Chapter 20, the scope of Adult transportation was reduced saving \$1,000,000 (state) per year in the next biennium.

Transportation services are provided to ensure MaineCare members are able to reach medically necessary services. There are 13 full-service transportation providers, while an additional 14 agencies provide wheelchair service. In addition to providing direct services, these agencies arrange volunteer vehicles, public transportation and reimburse MaineCare members at \$0.15/mile for use of their own vehicle when appropriate. In addition, members who travel out of state for certain services are reimbursed for their expenses at the state per-diem rate. All services that are provided that are beyond a member's "home area" require prior authorization.

Transportation providers bill a "base rate" for each trip they arrange. This rate has been determined based on the provider's costs and varies between \$4.00 and \$9.98 for arranging a single one-way trip. They are then also reimbursed for the actual transportation provided.

Continued

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
 (please explain below)

P55

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Medical Care – Payment to Providers 0147

Account Number(s): 010 / 013-10A-0147-01 **Page # in Bill:** C-24

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>(502,000)</u>	
<u>Federal Funds</u>	<u>(977,081)</u>	
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the deappropriation and deallocation of funds from a settlement due to inappropriate prescription drug re-labeling and repackaging practices by the Pharmaceutical Manufacturing Company Bayer.

Description of Impact on Program(s) – BE SPECIFIC:

This deappropriation is possible because of a recently settled court case in which MaineCare was awarded approximately \$502,000 due to inappropriate prescription drug re-labeling and repackaging practices by the Pharmaceutical Manufacturing Company Bayer. These inappropriate practices caused MaineCare to be over billed by the company. There is no impact on programs or clients associated with this initiative.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Health - Bureau of 0143

Account Number(s): 010-10A-0143-01 **Page # in Bill:** 17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>579,638</u>	<u>579,638</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Sec. P-6. Department of Human Services; revenue. Notwithstanding any other provision of law, the Department of Human Services shall seek reimbursement of expenditures under Medicaid Title XIX for targeted case management in the amount of \$579,638 in fiscal year 2003-2004 and \$579,638 in fiscal year 2004-05. This revenue must be deposited in the General Fund as undedicated revenue.

Description of Impact on Program(s) – BE SPECIFIC:

Within the scope of Public Health Nursing practice, PHN has identified several areas of services that can generate revenue to contribute to funding program activities. They are as follows:

Targeted Case Management (TCM) - Many years ago PHN provided targeted case management services to the prenatal and pediatric Medicaid population. This was discontinued about 3 years ago, when it was identified that records would not satisfy an audit. Since that time, PHN has worked to put in place a clinical and electronic documentation system that will document services and contain the information needed by an audit. As of this time, PHN is prepared to resume billing for targeted case management, having worked with the Bureau of Medical Services to receive approval to provide TCM services. Targeted Case Management requires the 1/3 match of general funds. The match will be provided through PHN salaries paid by the general fund. This is a legitimate source of funding for some of the services provided by PHN and has already received approval as noted in the agreement between BMS and PHN.

Historically monies from the State General Fund and the federal Maternal Child Health Block Grant have financed Public Health Nursing services. The federal grant is at maximum financial capacity and has dwindling funds available to support PHN services. In addition the State financial situation has resulted in significant ongoing reductions in funds available to support PHN services. We are to the point that if additional revenue is not available our nurses will sit at their desks and Maine residents will not receive services as there are no funds to support travel and materials needed for the provision of PHN services; the other option is to layoff nurses which will still result in a loss of services to Maine residents. The Public Health Nursing Program has been responsible and proactive in determining other revenue sources to support their service activities and to cover the reductions resulting from required cuts to the general fund allotments.

Does this Initiative have an impact on the 2006-2007 Biennium?

(Yes) _____ (Yes) _____
(please explain below)

G:/ofpr/Bills/121st/Part 2\FY 04-05 Part 2 Impact Form.doc

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Nursing Facilities 0148

Account Number(s): 010 / 013-10A-0148-01 Page # in Bill: 50/51

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>372,676</u>	<u>491,406</u>
<u>Federal Funds</u>	<u>(548,907)</u>	<u>(734,315)</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u> <u>Federal Block Grant</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

To Adjust appropriations and allocations in the Maine Care and Foster Care programs, since the Federal Financial Participation rate will decline, thereby increasing the State's share from 33.78% in FY 02-03 to 33.94% in FY 03-04 and 33.99% in FY 04-05.

Description of Impact on Program(s) – BE SPECIFIC:

The FFP (Federal Financial Participation) Rate will decline, thus the State of Maine's share will increase from 33.78% in fiscal year 2003, to 33.94% in fiscal year 2004, and 33.99% in fiscal year 2005.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
 (please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Nursing Facilities 0148

Account Number(s): 010 / 013-10A-0148-01 **Page # in Bill:** C-24

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>	<u>949,200</u>	<u>949,200</u>
<u>Federal Funds</u>	<u>1,849,680</u>	<u>1,849,680</u>
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>400,000</u>	<u>400,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Provides for the appropriation and allocation of funds required to increase reimbursement rates for municipally owned nursing facilities.

Description of Impact on Program(s) – BE SPECIFIC:

Federal Law limits what states can pay nursing homes to no more than what Medicare pays the nursing home. Medicare currently pays more than MaineCare at all Maine nursing homes.

This item raises the rates paid to Maine's only municipally funded nursing facility to the Medicare rate. This means that the Barron Center will be paid an additional \$400,000 next year.

Federal law also allows government entities to transfer funds through an Intergovernmental Transfer. This item has the City of Portland transferring \$333,333 of the increase back to the State. The City of Portland would "net" \$66,667.

The state would use \$133,333 to seed the increase and the state would "net" \$200,000. The other \$815,867 is the General Fund appropriation that was omitted in Chapter 20.

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs

Department/Agency Name: Human Services

Program Name: Interdepartmental Transfer

Account Number(s): Sec. P-2 **Page # in Bill:** 16

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>	<u>400,000</u>	<u>400,000</u>
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Sec. P-2. PL 2003, c.51 Pt. H, §7, is amended to read:

The Commissioner of Administrative and Financial Services shall annually establish the amount that must be transferred from the City of Portland as an intergovernmental transfer. The amounts that must be transferred to the State as undedicated General Fund revenue from the City of Portland must be \$1,000,000 in fiscal year 2002-03 and must be at least ~~\$2,000,000~~ \$2,400,000 in fiscal year 2003-04 and at least ~~\$2,000,000~~ \$2,400,000 in fiscal year 2004-05.

Description of Impact on Program(s) – BE SPECIFIC:

Federal Law limits what states can pay nursing homes to no more than what Medicare pays the nursing home. Medicare currently pays more than MaineCare at all Maine nursing homes.

This item raises the rates paid to Maine's only municipally funded nursing facility to the Medicare rate. This means that the Barron Center will be paid an additional \$400,000 per year.

Federal law also allows government entities to transfer funds through an Intergovernmental Transfer. This item has the City of Portland transferring \$333,333 of the increase back to the State. The City of Portland would "net" \$66,667.

The state would use \$133,333 to seed the increase and the state would "net" \$200,000. The other \$815,867 is the General Fund appropriation that was omitted in Chapter 20.

Does this Initiative have an impact on the 2006-2007 Biennium? (Yes) (Yes)
(please explain below)

**2004-2005 "Part 2" Budget Bill
Departmental Impact Form
Joint Standing Committee on Appropriations and Financial Affairs**

Department/Agency Name: Human Services

Program Name: Department wide

Account Number(s): General Fund

Page # in Bill: 16 / 17

FY 2003-04

FY 2004-05

Position or FTE Increase [i.e. (0.000)] / Decrease [i.e.(-0.000)]:

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Appropriation or Allocation Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Revenue or Balance Transfer Increase / (Decrease):

<u>General Fund</u>		
<u>Federal Funds</u>		
<u>Other Special Revenue funds</u>		
<u>Other (please specify)</u>		

Description of Initiative:

Sec. P-5. Department of Human Services accounts; lapsed balances. Notwithstanding any other provision of law, \$500,000 of encumbered balance forward in fiscal year 2002-2003 in the Department of Human Services accounts shall be disencumbered and lapse to the General Fund in fiscal year 2002-03.

Description of Impact on Program(s) – BE SPECIFIC:

Historically, the Department of Human Services lapses encumbered balances from prior year. See table below.

ENCUMBERED BALANCES THAT LAPSED INTO THE GENERAL FUND						
YEAR	1997	1998	1999	2000	2001	2002
AMT	694,928	879,161	685,852	614,145	173,531	942,724
ENCUMBERANCES THAT LAPSED BUT BALANCE CARRIED FORWARD						
AMT	50,522	89,211	89,060	1,059,093	239,562	680,467
TOTAL	745,450	968,372	774,912	1,673,238	413,093	1,623,191

Does this Initiative have an impact on the 2006-2007 Biennium? (No) (No)
(please explain below)

TESTIMONY SIGN IN SHEET

Page 1

COMMITTEE ON Appropriations and Financial Affairs

L.D. # OR CONFIRMATION: LD 1614 Part 2 Budget Bill

DATE: 7-May-03

PLEASE PRINT!!

HUM (DHS)

	NAME	TOWN/AFFILIATION	PROPONENT	OPPONENT	NEITHER FOR NOR AGAINST
1.	Peter Walsh	Acting Commissioner/Dept. of Human Services			
2.	Connie Garber	Transportation Director/York County		x	
3.	Richard Cohen	WHCA Transportation/Lemoine		x	
4.	Laurie Beal	Bucksport		x	
5.	James C. Wood	Maine Care Transportation Services		x	
6.	Lynn Nason-Courtney	Bethel		x	
7.	John J. Kelly	Volunteer Driver R.T.P.		x	
8.	Jon B. McNulty	Regional Transportation Program		x	
9.	Nancy Keene	Vanceboro		x	
10.	Donna Crowley	YCCAC		x	
11.	Laurie A. Golden	Wilton		x	
12.	Sherry Woodsome			x	
13.	Matthew Burrill	Bucksport		x	
14.	Mark Cafbo	Community Concepts		x	
15.	Jason Foster	York County Community Action		x	
16.	Fran McDonald	Acton (YCCAC)		x	



TESTIMONY SIGN IN SHEET

COMMITTEE ON Appropriations and Financial Affairs

L.D. # OR CONFIRMATION: _____ LD 1614 Part 2 Budget Bill

DATE: _____ 7-May-03

PLEASE PRINT!!

HUM (DHS)

	NAME	TOWN/AFFILIATION	PROPONENT	OPPONENT	NEITHER FOR NOR AGAINST
1.	Pamela Halt	WHCA Harrington		x	
2.	Beverly Pinkham	WHCA Milbridge		x	
3.	Callie Parker	Little Deer Isle		x	
4.	Joan Nunnally	Volunteer Driver/Skowhegan		x	
5.	Cindy Tufts	Community Concepts		x	
6.	Christine Lebeda	Lewiston		x	
7.	Linda Belfiore	WHCA		x	
8.	Russell Anderson	Maine Assoc. of Interdependent Neighborhood		x	
9.	Dolores Vail	Maine Council of Churches		x	
10.	Marc R. Muttu	Roman Catholic Diocese of Portland		x	
11.	Laura Lee Raymond	Maine Women's Lobby		x	
12.	Mary Henderson	Maine Equal Justice		x	
13.	Mary Mayhew	Maine Hospital Assoc.		x	
14.	Doctor Jo Linder	Maine Coalition on Smoking or Health		x	
15.	Carol Kelly	Friends for Fund for Healthy Maine		x	
16.	Katie Fullam Harris	Anthem Blue Cross/Blue Shield		x	



TESTIMONY SIGN IN SHEET

COMMITTEE ON Appropriations and Financial Affairs

L.D. # OR CONFIRMATION: _____ LD 1614 Part 2 Budget Bill

DATE: _____ 7-May-03

PLEASE PRINT!!

HUM (DHS)

	NAME	TOWN/AFFILIATION	PROPONENT	OPPONENT	NEITHER FOR NOR AGAINST
1.	Craig Nelson	Northern New England Assoc. of Homes & Services f/Aging	x		
2.	Andrew MacLean	Maine Medical Assoc.		x	
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.		Hampden			



Testimony by Connie Garber
before the Appropriations & Financial Affairs Committee
May 7, 2003

Senator Cathcart, Representative Brannigan, esteemed members of the Appropriations Committee. My name is Connie Garber, I am the Transportation Director for York County Community Action, and I am appearing before you today both in that capacity and as the Co-Chair of the Maine Transit Association's Legislative Committee. The Maine Transit Association's members include all of the MaineCare Full Service Transportation Providers. (*Refer to attached list*)

We're the people a MaineCare client calls with a trip request that they cannot provide on their own, and we are mandated to look for the most cost effective means to get them to a physician, to dialysis, chemotherapy, a mental health counselor, or other approved health care provider.

All of you in the Legislature, and you, as members of the Appropriations Committee in particular, have been forced into a **triage** situation this Session. As the wounded and critical are brought before you, you are called upon to make determinations that are never easy, ones where if the circumstances were different, you might choose differently.

Here are the "vital signs" for the "transportation patient" before you today that you will need to include in your deliberations:

First: The Part 2 Budget proposes restoring \$300,000 of the \$1 million cut in State funding for adult MaineCare Transportation. If you agree to these restore these funds, there would still be a loss of more than \$1.3 million because of matching requirements for Federal Medicaid funding. (*See Maine Transportation Directory*)

As it is currently proposed, the cost savings will be achieved by cutting what is called the "**Base Rates**" for MaineCare Transportation providers, along with cuts to other unit cost reimbursement. The Base Rate, a contract unit cost established in 1996 by the Bureau of Medical Services, was intended to cover all costs of operation, other than direct costs of providing

transportation, (fuel, driver salaries and fringe, maintenance, and insurance) which would be covered by the **"Pass Through Rates"**. *(Refer to attached sheet)*

These rates are arrived at following BMS approval of a detailed Cost Allocation Spreadsheet, with each Transportation Provider submitting their latest audited financial data.

For those Transportation Providers in the less densely populated areas of the state, with lower volume of trips requested, the per trip Base Rate needs to be higher in order to cover the costs of operation. It's a simple mathematical calculation:

Say it costs \$100,000 to provide services and you only provide 10,000 trips, your rate would be \$10/trip. If you provide twice the number of trips, 20,000, your rate would be \$5.00.

As a result, there is no single Base Rate in Maine, but a range, reflecting the geographic and operational realities of providing transportation in our rural state.

The second "vital sign": In today's budget, service efficiencies are crucial and expected.

- ❖ I know that when I work with my staff to get a community program to change arrival times for consumers so we can re-route buses to pick-up additional riders. We think of this as making the pieces of a jigsaw puzzle fit--- we often need to be creative to accomplish our goal of connecting all the people we hear from to their destinations.
- ❖ I know that when we train staff to use new technology that allows them to do their jobs more effectively. This includes everything from a simple thing like telephone headsets, so staff are not literally "picking up the phone" each of the hundreds of times it rings each day, to using computer assisted scheduling and dispatching.
- ❖ I know that when we work with doctors offices to schedule appointments at certain times so our vans can group riders traveling in that direction.

But MaineCare Transportation Provider Rates have not changed for many providers since 1997. They have not kept pace with the direct costs they were intended to cover: rising fuel cost, increased health insurance and vehicle insurance premiums. In addition, all MaineCare

Transportation Providers had their Base Rates cut by 3% on July 1, 2002 creating critical situations for a number of those providers that were already in need of a rate increase.

A third "vital sign": because Maine has been in the lead nationally in coordinating the provision of human service transportation, the current regional transportation providers use all available funding resources to provide the most cost-effective services for all clients. **If MaineCare services were cut in a region of the state due to inadequate funding, the ripple effect could result in the termination of all human service transports in a region.** Pre-school children, mentally retarded adults, physically disabled, elderly, could all have their transportation eliminated. This would then have a major impact on all MaineCare **health care providers** whose patients would not be able to access those services.

So now we return to the triage situation. Here's what we know:

- ✓ The patient is **active**: In the last 9 months, YCCAC has served over 2700 different riders, provided over 2 million miles of service through the efforts of our Volunteer Drivers, and people have made over 82,000 trips on our buses and vans.
- ✓ There are a lot of people who have been **"nursing"** the patient: ever since we heard about the proposed cuts, all of us, statewide, have spent countless hours in multiple meetings with staff at the Bureau of Medical Services, and among ourselves. We've been looking for remedies, being creative about how we can do what needs to be done, with the resources we have available. We understand the triage approach, we work daily with the need to make decisions about "best choices given bad options".

The people gathered around this "transportation patient" are passionate about what they are doing. When I was a child, and my Mom asked me what I wanted to be when I grew up, I NEVER answered: a Transportation Director! But I have been at my job at YCCAC for 22 years, and there are others in this room who have been doing it longer than that. Why? Because I see the faces, hear the stories of the people we transport, the people who turn to us when they have no other choice.

We live in an age where the so-called nuclear family, that once lived near each other and could help out, has exploded and now is dispersed over the countryside, holding down multiple jobs. We live in an age with longer life expectancies, with all the issues of larger numbers of aging individuals in our communities. We live in a time of HMO's that move people out of the hospital faster, and most follow-up care is on an outpatient basis. We, as a society, place value on each person having basic things: shelter, food, medical care.

In this country, in this state, in this room, critical decisions are made that impact the lives of so many people.

I ask: for those people who do not have the means to travel, who do not own a car, can't afford to insure it, cannot drive due to age or disability, **what is the value of having an appointment for physical therapy following a stroke if they can't get there? What is the value of offering any medical care, developmental therapy, counseling, if the children, elderly, persons with disabilities cannot get there?**

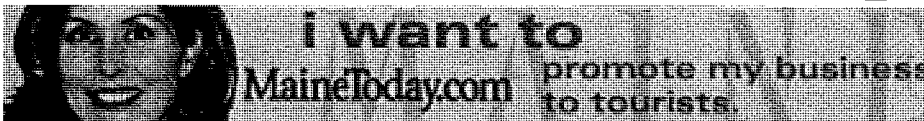
As you complete your triage deliberations, please look at this transportation patient, recognize the nurses ready to assist in the recovery process, and provide the needed funds to make the patient whole again.

Thank you for the opportunity to speak with you.

I would like to recognize several of the YCCAC Volunteer Drivers, one of our riders, as well as the other MaineCare Transportation Providers in attendance today. I want to express my thanks to all the Volunteer Drivers and riders here today who have taken time to travel to speak about an issue that they too are passionate about.

FY 04 - 05 MaineCare Cuts

	<u>General Fund</u>	<u>Fed. Medicaid</u>	<u>Total</u>
Part 1 Budget	(\$1,000,000.00)	(\$2,000,000.00)	(\$3,000,000.00)
Medicaidization of other State funds (BFCS)	\$400,000.00 (not new \$)	\$800,000.00	\$800,000.00
Restored Part 2	\$300,000.00	\$600,000.00	<u>\$900,000.00</u>
			(\$1,300,000.00)
<u>5/5/03 BMS Proposal</u>			
Cap Base Rate at \$7.00	\$173,154.00	\$337,060.00	\$510,214.00
Apply 5.79% cut to other rates	\$168,373.00	\$327,754.00	<u>\$496,127.00</u>
			\$1,006,341.00
		TOTAL	(\$1,300,000.00)
			<u>\$1,006,341.00</u>
	to be covered by service efficiencies:		(\$293,659.00)



HOME

CLASSIFIEDS

- Careers
- Homes
- Wheels
- Marketplace
- Place an ad
- WebPix

NEWS

- Local and state
- Midday/4PM Reports
- In Depth
- Week in Photos

WEATHER

- 5-day forecast
- On the Ocean

SPORTS

- High schools
- Pirates Cove
- Sea Dogs
- Running

BUSINESS

- News
- Resources
- Maine News Direct
- Classifieds
- Business Services

ENTERTAINMENT

- Movies
- Dining
- Music
- Theater
- Art

CALENDAR

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- Central Maine

TV LISTINGS

- Search your area

TRAVEL

- Visiting Maine
- Trip Talk
- Vacation Rentals
- Lodging guide

OUTDOORS

- Fishing
- Hiking
- Nature Watching
- More activities
- Campground Guide

20 BELOW

- Teen writing
- Views and reviews

CAREERS

- Classifieds
- Advice and info
- Featured employers

HOMES

- Classifieds
- Advice and info
- Featured agents
- Moving to Maine

Thursday, April 24, 2003

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MAINE VOICES: *Connie Garber*

Cuts in rides for needy do great harm

By CONNIE GARBER,

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Also on this page:
[ABOUT THE AUTHOR](#)

In a rural state like Maine, transportation services often are a lifeline, covering the long distances between where people live and the goods and services they need. They help more than 40,000 low-income, elderly and disabled Mainers lead healthy and productive lives.

ABOUT THE AUTHOR

Connie Garber (e-mail: cgarber@yccac.org) is transportation director of York County Community Action Corp. '

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That's why a \$1 million cut in MaineCare (Medicaid) transportation funding in the recently approved state budget for the next two years, which triggered a loss of \$2 million more in federal matching dollars, is so disheartening - and so devastating.

This cut will cripple the transportation network, forcing human service transportation to shut down in entire regions of the state, leaving the most vulnerable Mainers without access to vital services.

A coalition of nine regional transportation providers across Maine is urging the governor and the Legislature to restore funding to keep this system intact. We are working with state agencies to identify other state dollars that could take the place of some of the funding cut, but there is not enough available to make up the difference.

There is much at stake

Retiring in Maine
WHEELS
Classifieds
Resources and info
Featured dealers
MILESTONES
Weddings
Obituaries
MARKETPLACE
Classifieds
DIRECTORIES
Medical Directory
Education Guide
and more
ADVERTISING
Advertising products
Request a quote
About Us
Help/site guide



There is much to share.

Maine has been at the forefront nationally in creating a cost-effective and coordinated statewide human service transportation infrastructure since 1979, when "An Act Coordinating Regional and Intercity Public Transportation Programs" was enacted. This act divided the state into regions and mandated the development of a permanent public transportation system and a coordination of funds among all state agencies.

The strengths of this statewide system are that economies of scale are achieved by combining multiple funding sources; all state and local agencies purchasing transportation are assured high-quality, professional service; the numbers of people who are able to be transported to critical services are increased.

The daily operating costs for keeping buses and vans on the road, including drivers' salaries and fringe, fuel, vehicle insurance and maintenance of a fleet of vehicles, are allocated across all funding sources.

The volunteer driver programs, where members of the community offer their time and commitment and receive only mileage reimbursement, are very cost-effective but also labor-intensive. The support staff is required to manage the regional programs, beginning with the required volunteer screening and training, taking the trip requests and matching each with an appropriate and available driver.

The downside to this statewide service is the interdependent nature of the various funding partners: if one of the major purchasers of service withdraws funding, or cuts payment rates to a level that cannot cover costs, the whole integrated system is undermined. The loss of significant dollars from the funding mix leaves inadequate coverage for the overall system.

The ripple effect caused by the loss of transportation services begins with the loss of a ride. Consider:

The teenager in need of transportation to dialysis because both parents work. One parent would need to quit a job, perhaps finding part-time employment for less money and fewer benefits. Fewer benefits would mean higher out-of-pocket costs for medical services, leading to financial stress and potential loan defaults.

The widow of a veteran, struggling with illness and physical disabilities, who cannot afford a car and could not drive it even if she had one. She would lose access to vital medical services, leading to deteriorating health and possible hospitalization - at significantly higher public cost.

The elderly man who relies on once-a-week rides to the grocery store to continue to live at home. He might be forced to move to a residential care facility, also at much higher societal cost.

For thousands of Maine residents who do not have their own vehicle, regional transportation providers are a critical lifeline. These services provide an opportunity for a more productive life by providing a means to get to work or to training; to stay healthier with trips to medical appointments; to remain independent in the community with trips to day programs for persons with disabilities, or trips to grocery shopping.

It is a poor policy to bring about the destruction of our state's human service transportation network to save so few dollars, especially when the ultimate cost is so devastating.

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5/7/03

- Had services since I received a head injury in 1989.
- Drivers license gone and have no one to rely on except WHCA.
- WHCA has been one of the most important Keys to my well-being.
- I would have spent much more of my time ill or in an impatient setting if it weren't for these funds being provided.
- Taking the money away would be a true catastrophe to the consumers who use WHCA.
- Not only would it affect consumers now, but also potential consumers down the road.
- Money spent by the state on clients would go sky rocketing. It would actually save money in the long run to keep the funds for these services.

Laurie Beal
Bucksport, Me

**Testimony of James C. Wood before the
Appropriations & Financial Affairs Committee
on proposed cuts to MaineCare Transportation Services
May 7, 2003**

Sen. Cathcart, Rep. Brannigan and members of the Committee Chairs and members of the committee, I am Jim Wood, Transportation Director of KVCAP, which provides full service MaineCare and Social service transportation for Kennebec and Somerset Counties.

Over the last couple of months, Maine's transportation providers have held several meetings both as a group and with Bureau of Medical Services officials to find creative ways to narrow the gap between the proposed funding cuts for transportation and the funds needed to run our systems. While we have made some progress, a gap still exists that could carry some profoundly negative implications for Maine's citizens. While different areas of the State will be effected in degrees of severity, no area of the state will be immune from the effects of the budget cuts.

We recently heard the Governor's plan for a new and innovative healthcare plan that intends to provide access to quality and affordable health care to all of Maine's people. While the availability of health care is a critical issue, access at its core can be as simple as not having a ride to the services that are available. The best health care services will mean nothing to those vulnerable citizens who can't get to them. We are sending a dual message, one that says that quality healthcare is necessary and important and another that says we are willing to compromise the basic transportation access to these services.

In the brief time that we have had to look at the latest proposal from BMS, the impact remains clear. Buses and vans in some areas will come off the road, volunteers who provide essential transportation services to people will no longer be provided services and large numbers of people will no longer have access to the health and developmental services that are so critical to a healthy Maine.

We have narrowed that gap in the funding need to sustain our program, but not enough to avoid some dire consequences if the proposal is implemented as planned. The public and social service transportation system infrastructure place is based on a coordinated design in which services to all riders and funding sources are hurt by significant cuts to one of it's major contributors.

The volunteers that have become in essential part of the services provided to children under protective custody will no longer be able to afford to provide the service. The recent increase in fuel prices already put their commitment to a challenge. A further reduction in rates will make it impossible for many of them to continue their valuable work. People with disabilities whose only affordable resource are the accessible vans and buses operated by the transportation providers will be left at home or be forced into more costly alternative living arrangements.

I would ask you to carefully consider all of the implications of the cuts proposed to the transportation system. The core issue is access. We can't build a better healthcare system if we damage the infrastructure that thousands of Maine citizens rely on to access those vital services. The best healthcare services are only as good as people's ability to get to them. Please keep the transportation infrastructure intact by restoring funding to these programs.

Thank you.

TRANSPORTATION PROGRAM

FUNDING SUGGESTIONS

By John J. Kelly – volunteer Driver – R.T.P.

DEAR LADIES & GENTLEMAN:

It was with much surprise and sadness that I learned of the cuts being considered in the states transportation program. If the figures are accurate that the newspapers are reporting, that could mean that some, if not most of the county transportation programs could be seriously compromised, if not go out of business entirely.

This would not be good for the clients being served or those drivers who give their time and vehicles to transport those in need. Most of all it would not be good at all for those agencies who would be called upon, to pick up these clients who would call them for crises services.

In way of explaining my position allow me to give you a couple of examples to explain: if a person who needs kidney dialysis cannot get a ride any other way, he is well within his rights to call an ambulance to take him. Might I point out they would have to respond and take him to a Dialysis Center or he will die within 3 – 5 days without it.

SECOND: If a mentally challenged patient, who could not get a ride to his/her psychotherapist or doctor to get their medication or be monitored to

see if they are taking their medication, goes into a crises situation, it's a good bet that the police or fire dept. and an ambulance would be called to resolve the situation, take that person into protective custody and an ambulance would have to transport them to a hospital.

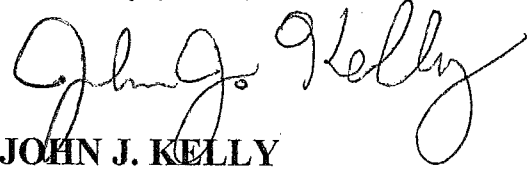
THIRD: and lastly, Ladies and Gentleman, most transportation volunteer programs would most probably go under, simply because there wouldn't be any volunteer drivers to take clients. Most of the drivers would quit because there probably wouldn't be enough rides to pay for the gas they would need to use and definitely the money wouldn't be enough to pay for the repairs to their vehicles.

TO REVIEW: Cutting the Transportation Programs funding would cause many of the clients we service to use emergency services in the city or town they live in. The people who thought they were saving money by cutting the transportation budget are really only going to spend more money in emergency services and they really aren't going to save any money at all. In fact they'll spend more money ultimately because the cost of emergency services is vastly more expensive than what Medicaid reimburses for transportation.

I urgently request that those who will make this decision take the time to think about what these funding cuts will cost the state in loss of volunteers, experienced transportation program staff, and the increased costs and strain

that will be placed on local and county Emergency Service Agencies. I strongly recommend a different solution to offset any cuts they may have to make.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "John J. Kelly".

JOHN J. KELLY

Volunteer Driver and Client

5/6/03



REGIONAL TRANSPORTATION PROGRAM, INC.

Jon B. McNulty, MSW
Executive Director
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www.rtprides.org

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Off: 207-774-2666
Fax: 207-828-8899
1-800-244-0704

Testimony before

Appropriations and Financial Affairs

May 7, 2003
1:00 PM
State House, Augusta

RE: Reductions in MaineCare Funding for Transportation

Chairpersons: Senator Mary Cathcart
Representative Joseph Brannigan

Senator Cathcart, Representative Brannigan, Members of the Committee

My name is Jon McNulty. I am the Executive Director of the Regional Transportation Program in Cumberland County.

First, I thank you, the members of this committee, for restoring to the budget \$300,000 of the proposed \$1,000,000 cut for human service transportation. I also thank various DHS staff persons who have worked closely with us on this crucial funding issue. I particularly recognize the efforts of the MaineCare staff whose time, hard work, cooperation and creativity have resulted in potential methods to increase costs savings, and so obviate the need for such a steep reduction in state funding for transportation.

Recognizing the good works that have been accomplished thus far, we still face a cut of \$300,000 of state funds which, when matched with federal funds on a 2 for 1 basis, translates to a total loss of \$1,800,000 for the two year budget period.

I strongly urge the committee to restore an additional \$300,000. This will ensure that seniors, persons with disabilities, low income children, and those who must access life sustaining medical treatment, such as dialysis, will have a strong transportation system in place to serve their needs.

Thank you.

Jon B. McNulty
Executive Director
Regional Transportation Program, Inc.
127 St. John Street
Portland, ME



A United Way Agency

Transportation Hearing – State House – Augusta, Maine – May 7, 2003

Good morning/afternoon. I am Nancy Keene of Vanceboro a volunteer driver for Washington- Hancock Community Action Transportation.

I transport patients from Washington County to Ellsworth and Bangor for dialysis, cancer treatment, surgery, eye care and other specialty medical treatment. These services are unavailable in our rural area, requiring travel. These patients have no other way to get to the required treatment.

Failure to receive regular treatment would result in a crisis requiring ambulance services, intensive care, nursing home, or other expensive care. Regular care is far less expensive than critical care. Being able to remain at home with some assurance of an ability to get to regular care removes a great deal of stress from the medical picture. Regular treatment is a matter of life or death to many of my clients.

There are ways to get the \$ 200,00.00 needed to generate the \$ 400,000.00 in Federal funds to continue the present program. People would understand a sales tax increase to fund medical and education programs. It would be similar to the containers of pennies small businesses keep at the cash register for people to put in or remove as necessary to their needs. Those who have extra pennies leave them for those who need them. This may be a close to a private fund raiser as we could get.

Life is difficult enough for Maines rural poor please don't add to their burden.

Thank you

Good Afternoon Sen Patheart, Sen. Brennan, Rep. Brannigan, Rep. Kene & members of the Joint Committee, ladies & gentlemen.

My name is Callie Parker. I am 81 years old, and my white hair and wrinkles are my Service Stripes. I am a resident of Little Deer Isle, which is located on beautiful Penobscot Bay. I have done various kinds of work; as a restaurant hostess, cashier and bookkeeper, also as a postal clerk. I have cooked in several summer homes (one summer for the then President and CEO of Campbell Soup Company). I have served my community as a Hospice volunteer, school board member, treasurer of our community school district, (CSD) AND BOARD MEMBER OF SEVERAL OTHER ORGANIZATIONS. In my church I have served as a Eucharistic Minister, ^{teacher} and lector. Most important of all, I have been a wife, mother of 8 children, and a loving homemaker. Three of my sons, and one daughter died as babies. They have become a goal I work toward daily. My three living daughters and one son have provided 15 grandchildren and 11 great-grandchildren for me to love. God willing, there will be another great-grandchild added to the clan in September. They all help me in every way possible. Since they all work they are unable to drive me to doctors' appointments. I don't know any doctors who have office hours on week-ends, so that leaves me without transportation.

I was married for nearly 48 years, and 13 years ago I became a widow. I have lived alone since then. I sold my husband's car to help pay for his funeral expenses. Fortunately, he happened to have a fairly decent car at the time, a step up from some of the others--the kind you drive up to the gas pump and say, "check the gas, please, and fill her up with oil." My husband was severely disabled with an incurable spinal condition which gave him constant pain for the last 50 years of his life. As a consequence, he was unable to work steady at anything; a truly tragic situation which killed his spirit and robbed him of his self-esteem.

In faith, family and friends I am one of the richest people I have ever known. When it comes to finances I am gravely challenged. My monthly income totals \$582.00 in Social Security and Supplemental Income (SSI). Clearly, there is no way I can afford the maintenance of a car. I have relied heavily on WHCA Transportation, for which I am deeply grateful. I live a mile from Route 15, and six miles to the nearest grocery store. The Island Medical Center where I go to see my doctor is 10 miles away. Blue Hill Hospital is

is around 40 miles from my home. In a very real sense, I feel imprisoned. This is also true for the thousands of low income people like myself, so you can readily understand that drastic cuts in transportation funds for the disabled and elderly who are totally dependent on those funds are in a scary situation. Since October of 2002, 2,300 clients have used WHCA transportation in the total number of 31,546 trips. The figures speak of the dire need for continuing support from the State of Maine, and from the Federal Government as well. We understand that some funding has been restored, but not in the amount needed to keep WHCA SERVICES ADEQUATELY funded. It is no exaggeration to state that Washington and Hancock citizens will be hard hit by lack of funding. It seems incredible to me that billions of dollars can be sent to Iraq when our own citizens are disregarded. Whenever I speak to our lawmakers, I feel the need to include a quotation from President Abraham Lincoln. Having experienced poverty himself, he must have spoken these words from his heart:

" The legitimate object of Government is to do for a community of people whatever they need to have done but cannot do at all or cannot so well do for themselves in their separate and individual capacities."

These are also important words for every U.S. citizen to cherish : "...Government of the People, for the People and by the People shall not perish from the Earth."

My sincere thanks, and may Almighty God abundantly bless each of you, and all your loved ones.

TESTIMONY IN OPPOSITION TO FURTHER REDUCTIONS IN THE TANF PROGRAM

Marc R Muttu
Roman Catholic Diocese of Portland
May 07, 2003

Senator Cathcart, Representative Brannigan, and members of the Committee on Appropriations and Financial Affairs, my name is Marc Muttu and I represent the Roman Catholic Diocese of Portland. I come before you today in reference to the proposed reductions in the Temporary Assistance to Needy Families (TANF) account before you.

The Catholic diocese has a long history of concern for the poor, the marginalized, and those that are most in need of society's assistance in meeting their daily needs. Those that rely on TANF are, as you well know, individuals and families that are struggling against tremendous odds to simply survive. They are, as Bishop Joseph suggested to you at his annual luncheon this year, those that can least absorb reductions in services and benefits. For them, reductions don't simply mean a tightening of the belt but rather it may mean the loss of fundamentals, such as a place to live, or adequate food. For these reasons we must, as a function of good government, seek to protect the fund first, not last.

The TANF reserve fund, intended to provide a cushion for unexpected fluctuations in the caseload, has been stripped of all its funds in the interest of balancing a budget. Now, a two million dollar reduction is proposed in anticipation of a caseload reduction next year under the assumption that the economy will improve. We too look with optimism to the future but suggest that it is too risky a venture given what is at stake to bank upon it today. Let's assume that the economy doesn't improve and the caseload stays the same, or even worse, it increases next year. What then? What measures will be needed to balance the account. Will the pressure to balance the account result in artificial measures to force reductions? It is, as I am sure you can agree a most speculative gamble.

I fully appreciate the responsibilities that balancing a budget places on you in these lean times. However, in the name of Bishop Joseph, I ask you today to consider the consequences of yet another cut to this essential program. I ask you to do what is right and just and reject the proposed two million dollar reduction in the TANF account. It is too risky and the stakes too high.

May 6, 2003

Testimony of Mary Henderson in Opposition to the Reduction of \$2 million from TANF as Proposed in Part II of the Governor's Proposed Budget

Senator Cathcart, Representative Brannigan, Senator Brennan, Representative Kane and members of the Committees on Appropriations and Financial Affairs and Health and Human Services. My name is Mary Henderson, I work for Maine Equal Justice and I am speaking today in opposition to the cut in TANF in SFY '05 of \$2 million proposed in the Governor's Part II Budget (page C-17 of draft Part II budget bill). We understand that the administration's proposal is to deappropriate, on a one-time basis, \$2 million from the general fund for Community Intervention Program funding and to replace this with \$2 million in TANF block grant dollars. We understand that the department justifies the TANF cut by anticipating a reduction in the TANF caseload. But the days of declining caseloads in TANF are long past. We simply do not believe that, given the state of the economy and the recent history of cuts in TANF that we can sustain the program adequately with this additional proposed cut.

As you know, the TANF program is our basic safety net program for low-income families with children. It helps meet the basic needs of over 22,000 Maine children and their parents. In addition to basic cash assistance, TANF dollars assist families with childcare, transportation, training and other key supports necessary for them to be able to work. These families are struggling to get by. According to a 2000 survey by the Maine Center for Economic Policy, within the year leading up to the survey, half (55%) of TANF recipients had within the last year received utility shut-off notices and 24 % had actually had their utilities shut off for non-payment; a quarter (26%) had run out of heating fuel; over 38% fell behind in their rent or mortgage, and 28% reported skipping meals for a day or more because they could not afford food. (MeCEP at 17, 18). Over half have in their household someone with a physical or mental

health problem that limits the parent's ability to work. The safety net is having trouble helping these families now and cannot sustain more pressure.

This is unsustainable for three reasons: 1) the program has already been substantially cut, 2) caseloads are not declining, and 3) federal block grant dollars are eroding.

As to recent cuts in TANF funding, Maine has now repeatedly used TANF dollars to fill the daunting deficits that the state has been faced with. Under federal law, TANF block grant dollars must be spent for TANF-related purposes – to help low income families with children. The state has instead used these TANF dollars to supplant state dollars elsewhere in the budget. In addition, the state has reduced its state funding of TANF through a variety of mechanisms, reducing its state maintenance of effort to the very minimum required by federal law.

In 2001, for the SFY '02 - '03 biennium, the 120th Legislature cut \$3,062,000 from funds that belonged in the TANF account. In 2002, the Legislature cut another \$6,774,000 from TANF for SFY '03. And in the Part I budget this year, about another \$5,000,000 of TANF dollars were coaxed out of the budget for the '04 – '05 biennium. All totaled, the program has already lost almost \$15 million in these two bienniums. The TANF program simply cannot afford the loss of another \$2 million in SFY '05. The TANF reserve is depleted and the program is being squeezed. There are three additional reasons these cuts cannot be sustained.

As to the caseload increase, in May 2001 it was 10,763 households, in May 2002, it had risen to 11,162 households and now it is at 12,391 households. It is about 11% higher this month than it was a year ago. This is not surprising given how closely the TANF caseload parallels the state's unemployment rate. (See attached chart). Absent a significant improvement in the economy and the unemployment rate, it is not realistic to take savings in the TANF account based upon a projected a lower caseload. It is a gamble that we should not take with Maine's low-income families. While the average monthly TANF benefit is very low—approximately \$380 a month—the annualized impact of caseload fluctuations are significant. Just as a caseload drop of 440 people can yield \$2 million in savings for a year; a comparable increase in caseload could just as easily leave the program \$2 million in the red.

Further, the rapid caseload declines that we saw in the past will not be repeated even if the economy does improve. As most of you know, Maine's experience with the TANF program has mirrored the nation's, with cases dropping by more than half, from the approximately 23,000 families receiving benefits in 1993 to roughly 12,000 families today. As the caseload has

declined, a much higher percentage of the families on assistance have significant barriers to employment. Over half have a health problem, or a child with a health problem that seriously impacts the kind and amount of work that they can do. One in five report having recently experienced domestic abuse from a spouse or partner.

The third point is equally critical. The value of our federal TANF block grant is eroding, and there is no reason to hope that this situation will change anytime soon. As most of you know, Congress is in the process of reauthorizing the federal TANF block grant. Additional funding for TANF does not appear to be likely. This means that we must continue to operate our state program with a block grant stuck at the value of 1997 dollars until at least 2007. Meanwhile the cost of the services that it purchases has been and will be subject to inflationary increases. The value of our TANF dollars is projected to fall by 22% over this 10-year period. We simply cannot afford to cut more dollars from the program.

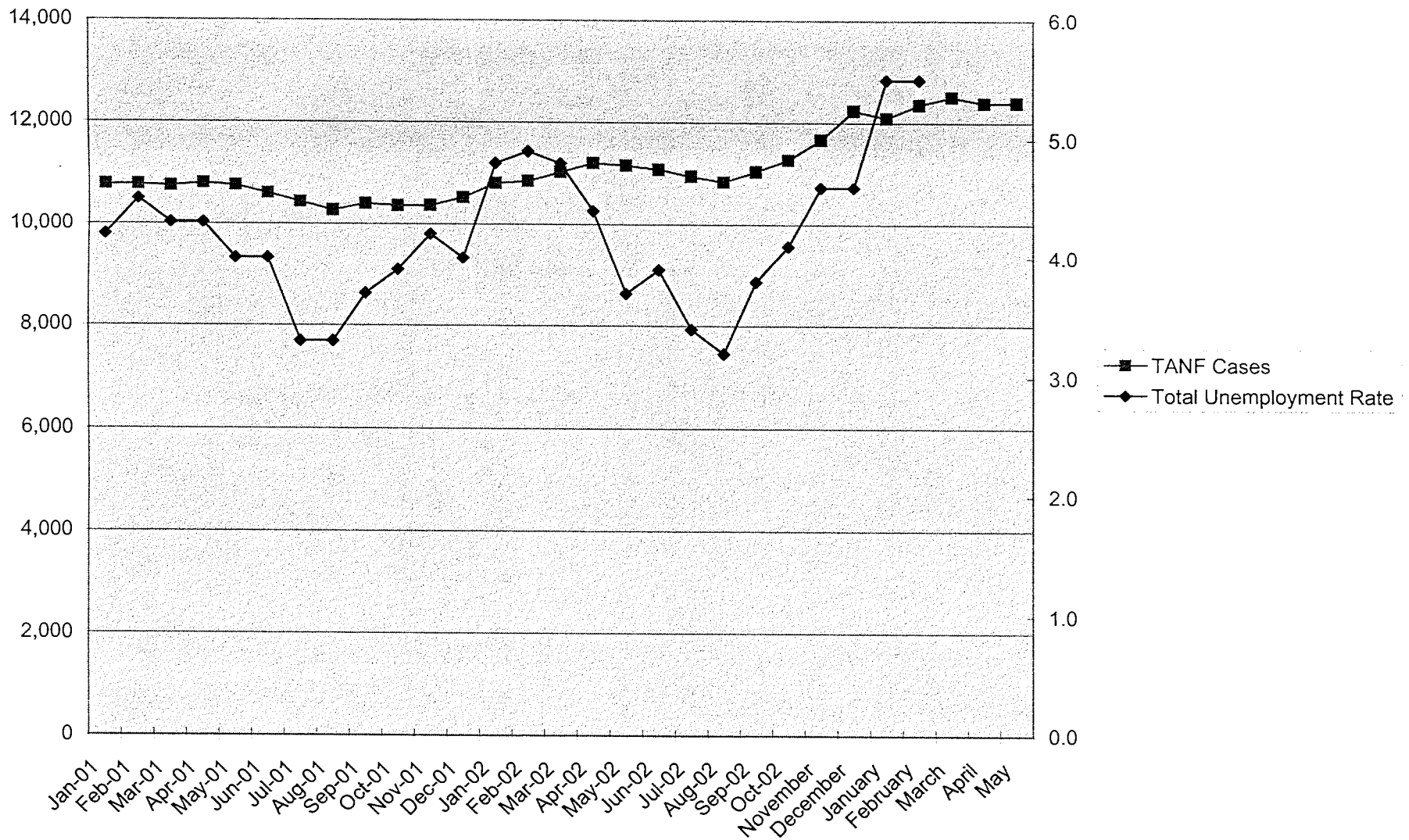
We understand that you have a difficult task ahead of you, but we are very worried that these cuts will make our most vulnerable families even more vulnerable in both the short and long run. So we strongly urge you not to make this cut.

Thank you for the opportunity to lay out our concerns about the need to protect Maine's TANF funding. I would be pleased to try to answer any questions that you may have.

TANF Caseload Changes January—September 2002

Month	TANF Cases	TANF cases change over previous month	Total Unemployment Rate
January 2001	10,782	-7	4.2 %
February 2001	10,775	-24	4.5
March 2001	10,751	+57	4.3
April 2001	10,808	-45	4.3
May 2001	10,763	-155	4.0
June 2001	10,608	-172	4.0
July 2001	10,436	-167	3.3
August 2001	10,269	+132	3.3
September 2001	10,401	-40	3.7
October 2001	10,361	+8	3.9
November 2001	10,369	+155	4.2
December 2001	10,524	+155	4.0
January 2002	10,810	+286	4.8
February 2002	10,853	+43	4.9
March 2002	11,028	+175	4.8
April 2002	11,204	+176	4.4
May 2002	11,162	-42	3.7
June 2002	11,086	-76	3.9
July 2002	10,953	-133	3.4
August 2002	10,843	-110	3.2
September 2002	11,045	+202	3.8
October 2002	11,276	+231	4.1
November	11,671	+395	4.6
December	12,236	+565	4.6
January	12,093	-143	5.5
February	12,354	+261	5.5
March	12,505	+151	
April	12,380	-125	
May	12,391	+11	

TANF Caseload compared to unemployment rate 1/01 through 5/03





**Testimony
of the
Maine Coalition on Smoking or Health
Regarding
Governor Baldacci's Draft Supplemental Budget for FY04-05**

Senator Cathcart, Senator Brennan, Representative Brannigan, Representative Kane, members of the Joint Standing Committee on Appropriations and Financial Affairs and the Joint Standing Committee on Health and Human Services. My name is Doctor Jo Linder. I am the chairman of Maine Coalition on Smoking or Health. I am here today, on behalf of the Coalition, to comment on Governor Baldacci's draft Fund for a Healthy Maine supplemental budget for FY 04-05. We are a statewide coalition of organizations and individuals working together to improve the health of Maine citizens by eliminating tobacco addiction and exposure to secondhand smoke. We are also committed to making sure that the tobacco settlement money is used as it was originally intended – for critical disease prevention and health promotion initiatives to keep Maine people healthy.

Prior to this legislative session, over 38% of tobacco settlement revenues received through FY 03 were diverted from the FHM to the General Fund. That happened in spite of the fact that we all know that prevention programs are less expensive than treatment after someone is ill. That happened in spite of the Legislature's original intention that these funds be used to supplement effective programs, not to supplant funding for existing ones.

The tobacco program in the Bureau of Health started with an FY 01 Fund for a Healthy Maine budget of \$16.5 million. The program took a cut of nearly \$4 million in FY 02, only \$1.8 million of which was restored for FY 03. Now more cuts to the tobacco program are being proposed – specifically, \$600,000 of evaluation money. Since the change package for this latest budget is not yet public, there may be additional program cuts that we are not even aware of.

As all of you know only too well, tobacco kills. In the State of Maine it is taking a huge toll on our citizens and our economy, costing us an estimated \$470 million per year in direct health care costs alone. As a result, one of the best investments we can continue to make with our tobacco settlement money is in our comprehensive program to reduce disease, disability, and death related to tobacco use. If Maine's tobacco program is permitted to operate as designed and with the funding it needs, the State should achieve the tobacco-related goals and

objectives of Healthy Maine 2010, the state's plan for addressing Maine's ten health priority areas for this decade. Without that funding, we will fail. Given tobacco's status as Maine's top preventable killer, the tobacco program in the Bureau of Health must be a top priority. Additional cuts would be very short-sighted.

By several measures, the tobacco program is making significant progress, but we have a long way to go. Evaluation money is not expendable. It is evaluation money that helps us determine whether we are making progress, and how much; whether programs are working or not. In spite of that fact, the tobacco program evaluation line has fluctuated more than any other line item in the FHM tobacco program – from \$1.2 million in FY 01 to \$500,000 in FY 02, and back to \$1.1 million in FY 03. The irony is that one of the first questions legislators tend to ask when they are thinking about cutting a program, and rightly so, is “How do we know whether the program is working?” Our question is, “How will we know whether it is working, if we do not have a stable source of funding with which to answer that question?”

Even at the current level of funding for evaluation, we are barely meeting the CDC guidelines for this component of a comprehensive program. On top of that, we are concerned that although the treatment program that is offered through the Maine Tobacco HelpLine is by all measures a smashing success, it is substantially underfunded. It, along with the rest of the tobacco program, is already facing four more years of flat funding. This is not the time to be taking money to address General Fund revenue shortfalls. The tobacco control program saves the State money every day. Let's let it work.

The draft supplemental budget before you is a result of reduced revenue projections, and realistically, none of us have any reason to believe we have seen the last of that problem. The Maine Coalition on Smoking or Health believes it is time to recognize the shortfall for what it is, and start looking for ways to replace some of those lost revenues. Taking money from a program that is addressing the number one preventable cause of death and disease in Maine simply makes no sense.

Thank you for letting us voice our concerns.

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Augusta, ME 04330

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207-622-6124
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RICHARD H. THOMPSON

CNELSON@DOYLENELSON.COM

May 7, 2003

**TESTIMONY OF CRAIG NELSON ON BEHALF OF NORTHERN NEW ENGLAND
ASSOCIATION OF HOMES AND SERVICES FOR THE AGING (NNEAHSA) RELATIVE TO
PROPOSED STATE OF MAINE 2004-2005 SUPPLEMENTAL BIENNIAL BUDGET**

My name is Craig Nelson. I am partner in the law firm of Doyle & Nelson here in Augusta and I am here today representing the Northern New England Association of Homes and Services for the Aging (NNEAHSA) in support of certain relevant portions of the proposed 2004-2005 supplemental biennial budget. NNEAHSA represents more than 50 not-for-profit long-term care facilities providing housing and services to nearly 5,000 in Maine and approximately 110 similar facilities in Maine, New Hampshire and Vermont with over 10,000 residents.

In the most recent 2003 supplemental budget, which was enacted last month, approximately \$1.6 million was removed from the revenue generated by the nursing home gross receipts tax and match program that was enacted in the supplemental budget last fall. These funds were to be paid to residential care and home health care service providers in addition to the money that would be paid to the nursing home providers out of the tax and match revenue.

NNEAHSA was very pleased to see that, as pledged by Governor Baldacci, these funds have now been restored in the proposed 2004-2005 supplemental budget with a total of \$1.4 million being payable to the residential care providers and \$200,000.00 payable to the home health care providers over the two-year biennium commencing on July 1st of this year. We also understand that these funds will be in addition to the \$1.6 million per year in the upcoming biennium that was included in the budget that was enacted at the end of March of this year that would also be payable to the residential care and home health care providers. This then represents a total of approximately \$4.8 million of much needed funding that will be payable over the biennium to these providers of essential services out of the revenue that will be generated from the nursing home gross receipts tax and match program. Although the

methodology has not been completely developed, we provide support for this part of the budget with the understanding that this revenue will be provided either in the form of additional regular, periodic payments to these providers or through a rate increase that would be implemented on or before July 1st of this year for the biennium.

The other part of this proposed biennial supplemental budget which NNEAHSA is providing conditional support for is what we understand to be a de-appropriation of approximately \$1 million per year of state funds due to revenue maximization changes in the method that MaineCare will utilize in reimbursing private non-medical institutions (PNMI) in that reimbursements will now be made on a flat per resident fee for services basis as opposed to reimbursing these providers on a cost basis. This revenue maximization is shown in the proposed biennial supplemental budget to generate \$1,946,376.00 per year in federal match. Since this system will be converting from a cost basis to a flat fee basis, it is obvious that, without some adjustments, there will clearly be winners and losers in that some providers will, on a flat fee basis, receive more than they receive on a cost basis reimbursement and others will receive less. Again, although the exact methodology has not been completely developed, NNEAHSA is providing its support for this part of the budget based upon the understanding that, in the 6 to 9 months which it is expected it will take to receive formal approval of this program from the Social Security Administration, the Department of Human Services will be working out a system utilizing these additional federal funds, which will allow a leveling of the payments that would be received by each provider so that we will not have the “winners and losers” result that would occur without some type of adjustment mechanism. Since it will take several months to obtain the necessary federal approval, we also understand that the existing system of reimbursement on a cost basis will continue in effect until this approval is forthcoming.

NNEAHSA supports these relevant provisions of the proposed supplemental biennial budget and is prepared to work with the administration, the Legislature and the Department of Human Services in an effort to establish payment methodologies for these two programs, which will establish a fair, equitable and predictable distribution of these funds to the respective providers.

Committee Member
State House
Augusta ME 04333

Dear Member:

This letter is to express my concern about the recent cuts and proposed cuts in the budget of the Mental Health and Human Services Departments.

TAP (Transportation Assistance Program) provides transportation for people who are unable to use public transportation and can't afford taxis. These people will no longer be able to go to their doctors' appointments. This especially effects those who do not live in the larger cities where public transportation is available or who are too severely handicapped to use public transportation.

TAP and Lynx also take people to Community Health and Counseling Services (CHCS) day programs. These are groups and classes that give people social interaction and life skills. With the proposed cuts to these programs, CHCS may have to close them entirely. This would result in many people, even those who would still be able to use TAP, staying home, alone, with no social interaction except medical appointments. (For those who can still reach those.) It is my opinion that a significant percentage of the people who would lose their opportunities for social interaction would require hospitalization much more often than they do now.

My own 2-week stay on a psychiatric ward cost \$15,000 (in 1997). It would be far cheaper to fund the transportation system and the programs that prevent these hospitalizations than to pay for them.

Also, concerning the Lynx Program. This program was originally created to provide transportation to the handicapped. A recent change in the agency rules, however, has caused the Lynx to stop providing services to the people who need them most (the severely handicapped). Specifically, people in wheelchairs or others who need assistance to and from vehicles. The Lynx drivers are no longer allowed to enter the clients' houses and assist them to the vehicle. This means that anyone in a wheelchair or using a walker or with extremely bad balance who cannot open and close the door by themselves are not eligible for transportation by the Lynx. Because the Maine statute does

not require taxicab companies to assist people with handicaps, this leaves the severely handicapped, the people whom the system was designed to help, without any transportation to social events or even doctors' appointments and other non-emergency medical needs.

Reducing the budget of the TAP program and other services may save a few dollars now, but will result in a greatly increased cost to Medicaid / Mainecare in the near future as lack of doctors' care results in more hospitalizations. And less social interaction results in more nervous breakdowns and suicides.

After my own nervous breakdown, I was released from the psychiatric ward with no home to go to (I went directly from the hospital to the homeless shelter), no doctor to keep track of my medications or renew my prescriptions, no psychiatrist to monitor my mental health and no psychologist to help me recover. I had not received any assistance in applying for Disability, Medicaid, or Food Stamps. All of these were provided to me through the services of CHCS.

The hospital was a safe haven for a few days, but without the community services to help me put my life back together, and the continuing support I receive in accessing available resources and developing skills that will help me return to the work force, I probably would have committed suicide by now. (I have bipolar disorder, PTSD, and disthymia, another form of clinical depression, and often had thoughts of suicide before I started receiving therapy and medication.)

Community services and social interaction are not luxuries. They are our link to the greater community. What would your life be like if automobiles were banned in Maine and only public transportation was allowed? But not increased from its current level of availability. That is what it is like for us.

Please give this situation some thought and research the medium and long-term effects of this budget cut.

Thank you for your time.

Priscilla Grant

April 7, 2003

To:

I'm concerned about the Maine Care budget cuts. That involves the CAP agencies. I am especially concerned about WHCA transportation. I live in Milbridge and don't have a car so I depend on WHCA to get to my family doctor at HFHC, the psychiatrist in Ellsworth, and CHCS Adult Mental Health Services at the Washington County Day Treatment Program in Machias. There are eight to ten people in our group who take WHCA to get there, so if we don't have the transportation our group will dissolve. We need these mental health services!

I'm not only advocating for myself but for all of us who regularly take WHCA. They won't be able to get to their doctors, therapy, kidney dialysis and chemo treatments. These treatments are a matter of life and death. What are you people thinking? Are we supposed to go backwards in the mental health services that keep us out of the hospital?

Please reconsider rebudgeting the allotment of money for all the transportation services in the State of Maine for the Maine Care clients. Thank You.

Lori Lewis

*121st Legislature
Senate of
Maine
Senate District 34*

*Senator Richard A. Nass
3 State House Station
Augusta, ME 04333-0003
(207) 287-1505
PO Box 164
Acton, ME 04001
(207) 477-2607
senrichard.nass@legislature.maine.gov
www.richardnass.com*

April 10, 2003

Ms. Jane C. Hackett
29 Oxford Street
Sanford, ME 04073

Dear Ms. Hackett;

Thank you for contacting me regarding the two-year budget cut as it affects transportation programs. I appreciate your sharing your concerns with me about this important issue.

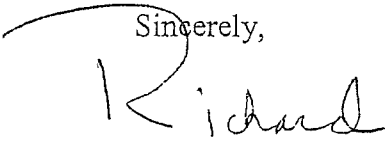
As you mentioned, the budget does include a \$600,000 cut in MaineCare transportation funding. Many Maine citizens have expressed their fears that these cuts may compromise needed medical transportation for the needy and elderly if additional funding is not secured by July 1st.

There were other plans that were being considered during the budget proceedings in the Appropriations Committee that would have been much more favorable towards MaineCare transportation services. Unfortunately, the Governor and a majority of legislative members wanted the language that was ultimately adopted.

There were numerous problems with the budget that was enacted. I could not in good conscious vote for this document knowing of the serious gaps it contained.

Again, I appreciate you taking the time to express your concerns. If you have any further comments, please do not hesitate to contact me at any time.

Sincerely,



Richard A. Nass
State Senator

YCCAP
P. O. Box 72
11 Cottage Street
Sanford, Maine 04073

April 11, 2003

Dear friends,

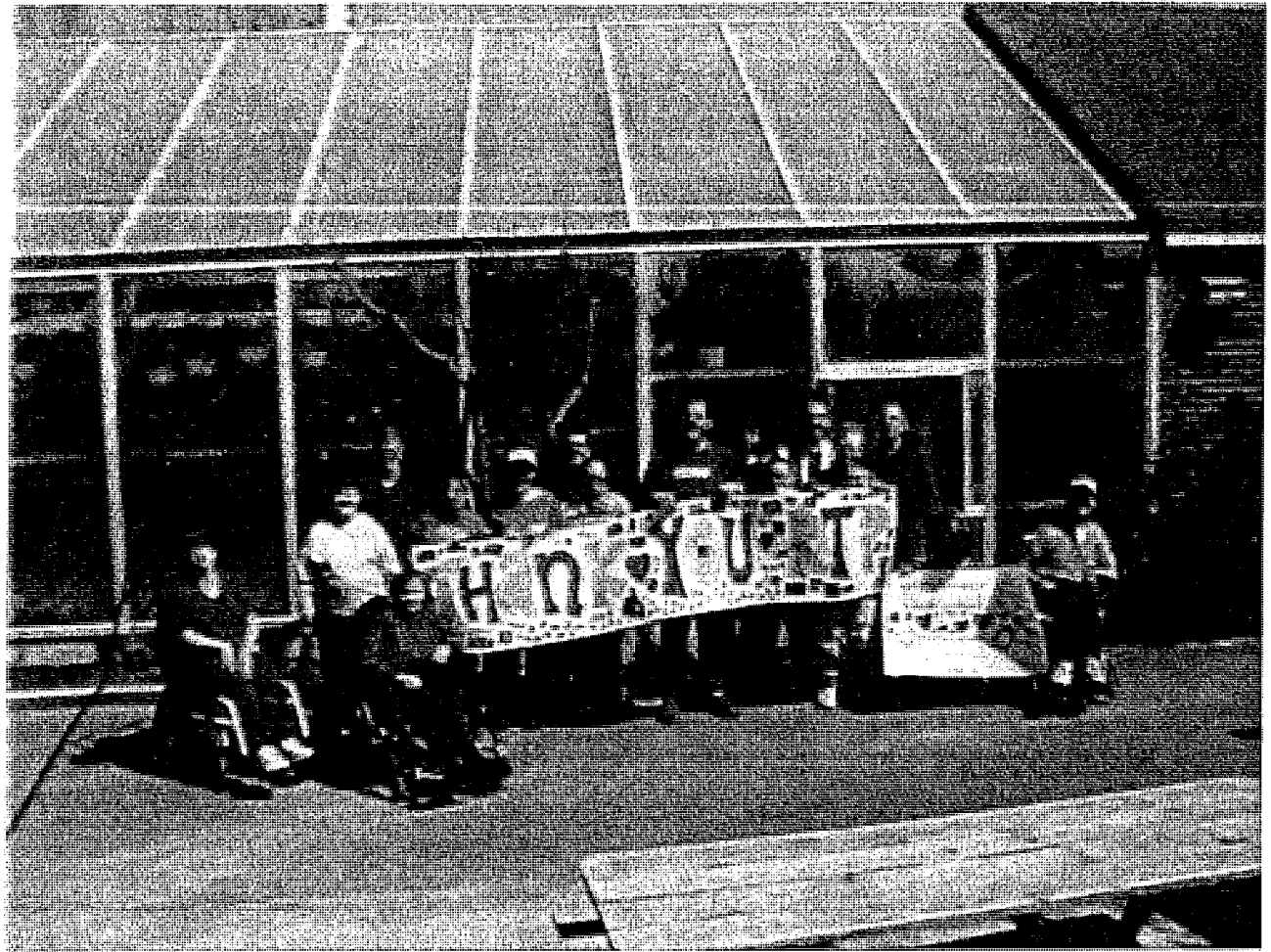
Please find enclosed copies of letters and pictures that were sent to the Maine Equal Justice Partners for lobbying on your behalf concerning recent budget cuts. I felt compelled to help in any way that I can. Many of our clients depend on your agency for transportation to work in our greenhouse program for adults with developmental disabilities. Most of the people who work here would not be able to continue coming if their transportation opportunities were lost.

Thank you for your great work in all that you do! Please know that you are appreciated for your services.

Sincerely,

A handwritten signature in cursive script, appearing to read "Holli R. Andrews".

Holli R. Andrews



Dear cap

I and Jack thank you for the divers
who diver me and Jack from
work and back home. All of you

at cap are number one to me and
Jack thank you very much for your
help you are all good people at cap

I hope we can keep divers and cap
open for every. Be cause cap is very
IM Portant to us all who go by

cap

by scott
Parker

April 10, 2003

Dear RTP:

The Morrison Developmental Center thank you for bring people to work shopping and appointment and back home five days a week. The Morrison Developmental center hope that RTP keep running for every

by the

green house

people.

Scott Parker
age 29

DEAR RTP my name is Jesse Joy and I ride the bus and I would
Be lost with out the bus I enjoy the bus a lot and if you tack it away
I would not know what to do it tickets me to morrison developmetal
Center my job is good and can be fun most all my coworkers get a rid
For RTP I would be grateful if we cloud keeper the bus thank you for
Your time

Jesse Joy

4/22/03

To Whom it May Concern:

I Am writing this Letter because I Am Very Worried, I Use the Community Action transportation program to go to Portland to my Doctor Every Week AS I have multiple Medical Chronic Conditions. I Am Diabetic, I HAVE Chronic VEINIOUS indeficiency, High Blood pressure, A TRACHEOSTOMY THAT NEED WEEKLY CARE. My legs NEED to be wrapped with bandages EACH WEEK BECAUSE OF WOUNDS THAT OPEN UP AND TAKE MONTHS TO HEAL. I will probably lose my legs if I don't have transportation FROM Community Action AS I Don't Drive AND HAVE NO family or Friends THAT CAN transport me to Portland EACH WEEK.

I hope you will consider All of the people like myself that will be hurt by the loss of this Great AND NEEDED program.

Sincerely,
Shean O'Brien

4/28/03

To: Community Action Group

If the information I received is correct, I am astounded. Do you really intend to stop the once-a-week bus service to Stephen Eaton Apartments?

If you are trying to cut financial corners, you must be beyond desperate to even consider stopping this service since the seniors pay for this one hour trip to Hannifords. If they had any other choice they would probably take it. However, they must have groceries and have absolutely no other way to get them. How do you expect them to cope with this situation - or don't you care. These people are elderly. They have nowhere to turn.

I suggest that you go back to the drawing board and return this bus service. These people have enough problems with their health without facing this momentous (to them) situation.

Yours truly,
Shirley W. Hamara
102 Stephen Eaton Ln, Apt 12
Wells, ME 04090

May 1, 2003

Honorable John Baldacci
Governor of Maine
1 State House Station
Augusta, Maine 04333

Dear Governor:

I am one of the users of the Transportation Service performed by the York County Community Action Corporation for the elderly, handicapped and low income people. Those of us who use this service have been notified that a proposed statewide cut in Medicaid (MaineCare) funds would take effect July 1, 2003.

Since YCCAC Transportation cannot provide Medicaid service at the proposed rates, and other human service funding would not be sufficient to cover the necessary operating costs for buses and volunteer drivers, there would be left only the Sanford Transit bus and the WAVE (Job access) vans which are not funded with human service dollars. This will of necessity cause a discontinuance of all the Transportation services of YCCAC.

There is no public transportation in any of the small towns of Maine. Therefore, we must rely upon the transportation services of YCCAC. Once a week we now have the privilege of going where there are supermarkets, drug stores, doctors, optometrists, dentists, hospitals, Senior Citizens' Centers, day care, etc. Great hardship would be created if this means of safe transportation were discontinued.

On behalf of all of us who would be affected, I appeal to you to do all in your power to appropriate the funds necessary to continue this vital service.

Copy to:
Acting Commissioner,
Department of Human Services
All State Senators and
Representatives - York Co.
YCCAC Transportation Director

Respectfully,

Anita Withers
Anita Withers
Box 31
Newfield
Maine 04056

MaineCare bus budget short

by Jonathan Cook

SANFORD — Almost 2,000 York County residents who need a ride to the doctor will have to get there with less help from MaineCare, the state's Medicaid program.

In spite of money recently plugged into a \$3 million hole in the state's Medicaid transportation budget, the total funding for programs like York County Community Action's buses — with routes to medical destinations — will fall shy of the projected need for the next two years.

As part of an effort to fund the Department of Human Services budget at the same level as the previous budget, DHS staff lopped \$1 million from the requested \$17.5 million for Medicaid transportation funds, according to Public Affairs Director Newell Auger.

But, that \$1 million cut amounted to a \$3 million loss because the federal government matches states with \$2 for every \$1 spent on Medicaid recipients.

York County Community Action transportation director Connie Garber was taken by surprise when the cut was announced because, she says, DHS "didn't understand the ramifications" on the programs of her office or nine others like it across the state.

However, in an effort to prevent what Garber says would have been the end of many public ride programs, DHS got creative. Through what he termed "Medicaidization," Auger says \$400,000 in funds already being spent on ride programs "tan-

entially related to Medicaid," — but not currently paid for with Medicaid money — will now be eligible for federal matching money.

Just how much this new accounting returns to the budget is a matter of dispute.

Auger says it's \$1.2 million back in the budget. But Garber says that number would include the \$400,000 already being spent by the state. She says the only new money would be from the federal match of \$800,000.

Another question about "Medicaidization" arises: if some programs are able to draw funding from Washington, why hasn't DHS applied for it in previous budgets?

"Necessity is the mother of all innovation," says Auger. Also, he says, some small programs have not been "worth the time and effort and paperwork," to file for federal matching money in the past.

Yet, even after Auger's number of \$1.2 million restores part of the cut, \$1.8 million is left before current levels of service can be maintained, says Garber. Furthermore, she says that current levels aren't even enough to get all Medicaid recipients to all of their appointments when they can't get their own ride. The prospect of rolling back service goes against a federal mandate that all Medicaid recipients have "access" to medical care, Garber points out.

That's why cutting transportation funding could wind up costing taxpayers more, according to Transportation Director Tom Reinauer of the Southern Maine Regional

Planning Commission, the agency that processes grant applications for Garber's office. Reinauer says that when a Medicaid recipient can't get a ride to a doctor's appointment, an expensive ambulance service may be required.

Facing that prospect, DHS has now announced the discovery of \$300,000 "in cost savings from other Medicaid programs" that will be applied to transportation to receive another \$600,000 from Washington.

All in all, Maine's Medicaid program has fared better than many other states in this time of national budget shortages, according to Auger. He says that Massachusetts has "knocked 36,000 (people) off the (Medicaid) rolls." But in Maine, DHS wanted to make sure "no one would be kicked off the program."

In that sense, he says, the budget has been a success. Although, he admits that, with increasing MaineCare enrollment, the need to "flat-fund" the budget means each dollar will have to go farther.

Because of the state's funding formula, York County gets less money per rider than other regions. That means Garber doesn't know just how far the new budget will take York County residents, but for now, all she can do is hope the money will go as far as the doctor's office.

DEVASTATING COST

Cuts in rides for needy do great harm

● By removing their one link to independence, they will become more dependent, at a greater cost to taxpayers.

By CONNIE GARBER

In a rural state like Maine, transportation services often are a lifeline, covering the long distances between where people live and the goods and services they need. They help more than 40,000 low-income, elderly and disabled Mainers lead healthy and productive lives.

MAINE VOICES

That's why a \$1 million cut in MaineCare (Medicaid) transportation funding in the recently approved state budget for the next two years, which triggered a loss of \$2 million more in federal matching dollars, is so disheartening — and so devastating.

This cut will cripple the transportation network, forcing human service transportation to shut down in entire regions of the state, leaving the most vulnerable Mainers without access to vital services.

A coalition of nine regional transportation providers across Maine is urging the governor and the Legislature to restore funding to keep this system intact. We are working with state agencies to identify other state dollars that could take the place of some of the funding cut, but there is not enough available to make up the difference.

There is much at stake.

Maine has been at the forefront nationally in creating a cost-effective and coordinated statewide human

ABOUT THE AUTHOR

Connie Garber (e-mail: cgarber@yccac.org) is transportation director of York County Community Action Corp.

service transportation infrastructure since 1979, when "An Act Coordinating Regional and Intercity Public Transportation Programs" was enacted. This act divided the state into regions and mandated the development of a permanent public transportation system and a coordination of funds among all state agencies.

The strengths of this statewide system are that economies of scale are achieved by combining multiple funding sources; all state and local agencies purchasing transportation are assured high-quality, professional service; the numbers of people who are able to be transported to critical services are increased.

The daily operating costs for keeping buses and vans on the road, including drivers' salaries and fringe, fuel, vehicle insurance and maintenance of a fleet of vehicles, are allocated across all funding sources.

The volunteer driver programs, where members of the community offer their time and commitment and receive only mileage reimbursement, are very cost-effective but also labor-intensive. The support staff is required to manage the regional programs, beginning with the required volunteer screening and training, taking the trip requests and matching each with an appropriate and available driver.

The downside to this statewide service is the interdependent nature of the various funding partners: if one of the major purchasers of service withdraws funding, or cuts payment rates

to a level that cannot cover costs, the whole integrated system is undermined. The loss of significant dollars from the funding mix leaves inadequate coverage for the overall system.

The ripple effect caused by the loss of transportation services begins with the loss of a ride. Consider:

● The teenager in need of transportation to dialysis because both parents work. One parent would need to quit a job, perhaps finding part-time employment for less money and fewer benefits. Fewer benefits would mean higher out-of-pocket costs for medical services, leading to financial stress and potential loan defaults.

● The widow of a veteran, struggling with illness and physical disabilities, who cannot afford a car and could not drive it even if she had one. She would lose access to vital medical services, leading to deteriorating health and possible hospitalization — at significantly higher public cost.

● The elderly man who relies on once-a-week rides to the grocery store to continue to live at home. He might be forced to move to a residential care facility, also at much higher societal cost.

For thousands of Maine residents who do not have their own vehicle, regional transportation providers are a critical lifeline. These services provide an opportunity for a more productive life by providing a means to get to work or to training; to stay healthier with trips to medical appointments; to remain independent in the community with trips to day programs for persons with disabilities, or trips to grocery shopping.

It is a poor policy to bring about the destruction of our state's human service transportation network to save so few dollars, especially when the ultimate cost is so devastating.

—Special to the Press Herald

MONDAY
APRIL 7, 2003

York County & State

Deaths / 4B
Television / 5B
Monday Magazine / 8B

SECTION
B

Cuts jeopardize rides for elderly, needy

● The two-year budget would cut money for transportation programs.

By JUSTIN ELLIS
Staff Writer

Transportation providers are lobbying the Legislature to restore funding for human services-related transportation programs when lawmakers take up the supplemental state

budget this week.

The two-year budget approved two weeks ago included a \$600,000 cut in funding for MaineCare transportation, which supports transportation to medical and social service appointments for the state's elderly and disabled.

The reduction in MaineCare funds would result in an additional loss of \$1.2 million in matching federal Medicaid funds. Without adequate funding from federal or state sources, transportation providers say they

could be forced to close their doors.

Newell Auger, a spokesman for the Department of Human Services, says DHS has been working with transportation providers and others to identify savings possibilities and run the programs as efficiently as possible.

"These cuts are difficult for everyone, but we wouldn't have made them in the manner that they were if we thought they would jeopardize our compliance with federal regulations in any way," Auger said.

Ten providers from around the state have joined together to ask legislators to find alternatives to reducing MaineCare funding. The coalition is also working with the Department of Human Services' Bureau of Medical Services to find other methods of cutting costs or generating revenue.

Earl Phillips, 51, of Sanford says he would be left without any means of getting to the pharmacy or to regular doctor's appointments if transportation services are suspended.

Phillips requires frequent

treatment for a sore on his foot that has failed to heal because of diabetes. He's already had surgery to repair his foot and worries that another trip to the hospital could be in his future. Without a ride back and forth to his doctor, he fears he could lose his foot altogether.

"Without transportation, I wouldn't be able to go see the doctor or have my foot taken care of," he said. "But there are people that are worse off than I am out there that need it."

For more than a year, Phillips has

STATE HOUSE '03

been relying on transportation provided by the York County Community Action Corporation. The program not only transports the elderly and disabled, but also low-income clients, those with mental illness and young children going to preschool programs.

Please see CARE, Page 3B

"Maine is really one of the leaders in the country in providing coordinated transportation services," said Connie Garber, program director of the agency. "For more than 20 years we've had regional transportation providers."

Garber estimates the program provides transportation services for more than 2,000 people in York County. The program relies on state and federal money, combined with regional funding from other community organizations, such as the Southern Maine Agency on Aging.

Like many transportation providers around the state, the York County agency operates a fleet of vehicles with fixed weekly routes and door-to-door service. The program also has volunteers who offer their time and vehicles to make trips.

Without state and federal funding, many programs would not be able to meet their operating costs, which include fuel, repair and insurance, Garber says.

With a number of providers operating at a loss on MaineCare services and an increase in the number of MaineCare recipients, she says some might have no choice but to close their doors for good.

"If the number of MaineCare recipients eligible for transportation goes up, that could really put us in a corner," she said.

Staff Writer Justin Ellis can be contacted at 791-6380 or at:

jellis@pressherald.com

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YORK COUNTY COAST STAR

AN INDEPENDENT VOICE FOR YORK COUNTY SINCE 1878



125 NO. 14

THURSDAY, APRIL 3, 2003

FIVE SECTIONS/70 PAGES

75 C

Cuts would cripple transportation services

By John Swinconeck
Staff Writer

York County Community Action Corp. said Gov. Baldacci's plan to cut \$600,000 in MaineCare transportation funds would cripple transportation services in York County and throughout Maine.

According to YCCAC, the loss in funds would mean losing \$1.2 million more in matching federal Medicaid funds.

"The ripple effect of this budget cut would be devastating to the most vulnerable Mainers who need these essential transportation services in a rural state such as ours," Connie Garber, YCCAC Transportation Director, said in a written statement. "Pre-school children, mentally retarded adults, the physically disabled, the elderly, would all have their transportation eliminated."

Over 40,000 people could be affected by the cuts, according to YCCAC.

Linda Belfiore of Washington Hancock Community Agency said in a statement that the only way to keep the transportation system intact would be if lawmakers restore the funding.

State transportation providers said the cuts would cause a ripple effect that would cause many full service transportation providers to close, the providers warn.

"This would leave wheelchair van and taxi services as the remaining transport options for MaineCare

recipients without a car, at a higher per unit cost, with no full service transportation provider to arrange any trips," Belfiore said.

Belfiore said MaineCare providers would work with state agencies to cut costs if the \$600,000 cuts can be avoided.

YCCAC said MaineCare transportation providers could not absorb the \$1.8 million loss in state and federal funds.

A coalition of 10 Maine transportation providers, including Regional

Transportation Program of Cumberland County, Community Concepts of Oxford and Androscoggin Counties and Waldo County Committee for Social Action, are asking the governor to keep the funding intact.

In an e-mail, Garber said the cuts would mean YCCAC Transportation could not provide Medicaid service at the rates that are now proposed.

"Because these funds comprise almost two-thirds of our operating

See YCCA, page 17A

YCCA

Continued from page 1A

budget, if we are not doing any of these units, the other human service funding we receive will be inadequate to cover the operating costs for our buses and volunteer drivers," she said. "The only services that would remain intact are those funded through Maine DOT with Federal Transit Administration dollars, namely the Sanford Transit bus and the WAVE (Job Access) vans."

YCCAC's transportation program provides residents with access community services and resources which they would otherwise not be able to get to. The organization maintains 19 bus routes, and has over 85 volunteer drivers that operate their own vehicles and are reimbursed for mileage and tolls.

Rhoda Emery, 89, of Elliot said she takes a bus provided by YCCAC to do

her shopping, which includes the supermarket, pharmacy and a K-Mart. She pays \$2 for the round trip, and said she'd be willing to pay more if she had to.

"Even a \$5 charge would be worth it," she said. "I go every week. They come every Monday morning, and they're very prompt."

Lucy Anderson, 73, of Kittery also uses the bus to do her shopping once a week. "That's all we have here," she said. "York Hospital provides free transportation to go to doctor appointments, if your doctor is affiliated with York Hospital."

Anderson said the bus was important, especially to those on a fixed income.

Garber said there has not been any discussion of impacts on other programs within YCCAC.

"Obviously the share of agency-wide overhead costs currently borne by the transportation program would

need to be re-assessed," she said.

"The people we serve, our riders, the community based agencies providing programming, and our human service funding sources need to understand that YCCAC is committed to looking for solutions," she said.

"We will continue to work with all the other MaineCare Transportation providers state-wide to identify alternative funding so that this drastic shutdown will not have to occur.

Efforts to obtain comment from Baldacci's office were unsuccessful.

OPINION

Editorial

No wheels

State should reconsider plan to put transit programs in neutral

Every program in state government has a constituency and a cheering section, which is heard from every time major cuts are proposed. By now, legislators and Gov. John Baldacci are no doubt getting used to the chorus of protests set off by the budget they approved last week.

Cuts are necessary this year, when the state's bank accounts are not just dry but overdrawn. But not every cut is equal, or wise. The decision to slash \$600,000 from the MaineCare transportation program seems especially unwise.

We'll give you two reasons.

One, by deciding to take the funds away from the transit program for low-income Mainers, the state is forfeiting twice that amount — \$1.2 million — in federal transportation funds. This means that without even meaning to, the state is likely to flatten the tires of transit programs that are vital for many residents.

In York County, for instance, the bus service run by the York County Community Action Corp. employs 17 buses, many bus drivers and a battalion of volunteer drivers to transport seniors to their doctors' appointments and people of any age with special needs to their medical, school, work and other destinations. The blue and white buses are a familiar sight along the county's roads, especially in areas not served by regular transit services.

Only a skeleton of the service will remain if the state doesn't restore some of the funding in its supplemental budget later this session.

Yanking this service would be a serious blow to people with serious needs and limited means. Like child care, transportation is an essential, daily need whose loss can cause all kinds of unintended consequences.

The second major reason for legislators to consider restoring the transit funding when possible is the rural nature of this state. If Maine were more densely populated or better equipped with commercial transit systems, social service agencies wouldn't have to spend so much time thinking about transportation.

But outside of a few central communities (Biddeford and Saco have the ShuttleBus), this is a state dedicated exclusively to the private car. Those without wheels, and without the ability to get them because of physical or financial limitations, are at a huge disadvantage.

With the latest budget cuts, they're likely to be left standing at the bus stop for a long, long time.

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3/29/03

Journal
Tribune

ONE DOLLAR

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The newspaper of York County, Maine

Weekend

YCCA: Budget cuts could kill services

By TAMMY WELLS/Journal Tribune
twells@journaltribune.com

SANFORD — A York County Community Action Corporation program which provides bus and other transportation services to 3,000 elderly and disabled clients could essentially fold by July 1 unless a supplemental state budget restores funding, its transportation director said Friday.

State cuts that also trigger a reduction in

matching federal dollars means YCCA won't have enough money remaining from other sources to continue to provide service to most bus and volunteer driver programs, said Connie Garber. Two programs likely to remain in service, a Sanford transit bus and four vans that transport workers to their jobs, are funded solely by federal money, she said. The cuts, included in the state budget approved Thursday, trim a total of \$600,000

statewide from MaineCare transportation funds which, Maine's nine transportation provider agencies agreed, would trigger the loss of \$1.2 million in matching federal dollars statewide. The move, they added, would collapse the human service transportation network throughout Maine, from Calais to Kittery.

"It's pretty serious," said Sen. David Carpenter (R-Springvale). He said he'd work

on the situation in the upcoming supplemental budget.

For the program Garber directs, the MaineCare loss totals \$250,000. And even though some clients' rides are funded through other means, she said, not enough remains

■ YCCA

Continued on Page A3

■ YCCA From Page A1

from those sources to run the transportation program as it now exists. She estimated that 90 percent of the program would disappear.

"I feel what we're doing makes a difference," Garber said.

"I can't believe they would let this happen."

YCCA currently has 17 buses on the road each day and has an army of about 90 volunteers who transport clients in their own vehicles.

For 22 years, YCCA has provided rides for senior citizens for doc-

tor's visits and other medical appointments, like dialysis. It also provides rides for pre-school special needs children, mentally retarded adults and those who are physically disabled.

Cynthia Monat, 51, of Sanford, depends on the system. She uses Sanford Transit for in-town services, but relies on YCCA's volunteer drivers to take her to physical therapy and other medical appointments out of town, she said. Her daughter, who also requires physical therapy, uses the service as well.

On a fixed income, Monat doesn't have a car and taxis are simply unaffordable, she said.

"The ripple effect of this budget cut would be devastating to the most vulnerable Mainers who need these essential transportation services in a rural state such as ours," said Garber. "Pre-school children, mentally retarded adults, the physically disabled, the elderly, would all have their transportation eliminated."

In a prepared statement Friday, the nine transportation providers said Maine won't be in compliance with a federal mandate to assure non-emergency medical transportation for all recipients, nor with court-ordered child welfare mandates, if the cuts remain.

They estimated that 40,000 chil-

dren, elderly and others would not be able to access critical services.

MaineCare service providers include Penquis Community Action Program, Washington Hancock Community Agency, Waldo County Committee for Social Action, Coastal Transportation, Kennebec Valley Community Action Program, Community Concepts, Western Maine Transportation Services, Regional Transportation Program and YCCA.

The potential shutdown at the YCCA transportation program means laying off between 25 and 30 office workers and bus drivers, Garber estimated.

THE

VOICES

OF

YORK COUNTY

May 2, 2003

To whom it may Concern:

I am writing to you about the tax cuts to the MaineCare Transportation Services. I would have a very hard time trying to find a ride to my medical appointments because everyone I know work during the hours I would need to make my medical appointments. I would be totally lost without the service CAP provides for me. I am 100 years old and need to be seen by my Primary Care physician regularly and without the service Cap provides for me my health would be at risk. The services of Cap are much needed in Maine due to no public transportation.

Sincerely,

Marjorie Fisher

W. Newfield, Me

April 24, 2003

Dear Governor Baldacci

Last November I went to the polls optimistic that the Democrats would once again be in Augusta. As a Democrat I must say I am not only disappointed but also angry that you and your legislature have passed a tax cut effective July 1, 2003 that will cripple the low-income of Maine. I am speaking of the 1.08 million dollars from the MaineCare transportation program.

I have been affiliated with York County Community Action for a period of 9 years in both capacities as a dispatcher and now a volunteer driver. I have total insight on how important this program is for York County. This service is not a convenience to the low-income of Maine in many cases a life saving necessity.

Imagine being the parent of a child and not be able to receive medical attention due to no transportation. I see the worry and concern of parents with seriously ill children and without the help of the volunteer driver program these children may not receive the medical attention needed. Many of these families do not have a vehicle or one vehicle that is needed for transport to the job that keeps the family going financially, without the help of transportation the family dynamics would certainly suffer. A situation of this manner is frightening, as the families would have to choose between working and caring for the critically or chronically ill family member. In my history working with the low-income of Maine a decision in this manner would then put the family on the roles of public welfare programs, becoming a more expensive use of government funding programs.

Governor Baldacci, I feel privileged to volunteer my vehicle and time for my neighbors sharing with them their worry, their grief and rejoice

in their triumphs and how grateful they are for something as simple as a ride.

I implore you to stop this tax cut before July 1, 2003, as the repercussion of this decision will be devastating to the residents of Maine possibly resulting in death.

Sincerely,

*Fran McDonald
Acton, Maine*

14 April 2003

I can not begin to believe what I have been reading in the papers lately and seen on TV about the proposed cutting of funds to York County Communication Action. The thought of this just leaves me wondering what will be next.

How can some of the handicap/disabled people get to their destination? Some (more than we realize) have no means of transportation to their medical appointments, etc. Doesn't seem right that we should ask them to suffer more and worry about how to get to their sometimes "life saving" appointments. People that are on fixed incomes don't need anything else to worry about or add to their hardship.

My daughter has 5 children and some of them have special needs and with only her husband working, living in a rural area, and one vehicle, it's very difficult for her to find a ride, or make an appointment. Her husband works long and many times, late days. She has an eleven (11) year old daughter who is living with us temporarily who "MUST" go to Casco Bay Dialysis 3 days a week from 4:00 PM till about 8-8:30 PM. She is awaiting a kidney transplant. This is a dire need for her. As I stated, she's temporarily living with us. My husband is not working at the present due to 2 separate surgeries he has had. He will be out of work a while longer. He has taken our granddaughter to her dialysis appointment with special thanks to YCCA drivers, on crutches. He was not able to drive due to knee surgery. I work and have to be up by 2:45 AM in order for me to be to work for 4:30. I drive to and from work daily, which is about 75 miles per day. I take her also to dialysis a couple times a week thanks to YCCA drivers. I would take her myself but sometimes the dialysis runs late and I am pretty sleepy by then and due to this I will not take a chance of driving home and having an accident. Thanks to the courteous drivers, I can just sit back and keep an eye on my granddaughter as sometimes she doesn't feel well before or after her appointment (she has had some seizures in the past) till we get there or back home without worrying if something will happen.

We've all been asked to carpool if possible to try and keep our air clean and help out with less congestion on our roads and highways. Now, they want to put more vehicles on the road and some with handicapped drivers.

You need to put yourself in the place of some of these people. As you sit at home, healthy, warm and cozy with your family by

your side, think of what it would be like if the tables were turned. How would you feel if you had a disability? If you were on a fixed income, health problem, no family around or all working and had to go to an appointment that you desperately needed? Would you get in your car (if you had one) knowing that you might not make it to your destination? I have seen some of these people who go to dialysis. They are in "NO" shape to drive before they get there and even less when they leave. Don't you think that they have a hard enough time dealing with this without making their life more miserable? Don't you think that they wish they were like every normal person out there?

As for the drivers at YCCA, most of them depend on this modest income to help them make ends meet. Some are handicapped themselves with hearts of gold. They are caring, courteous, polite and personable drivers. They care about their passengers and worry when they cancel their appointments. These people are special to those of us who need them for our own reasons.

It's a pity that a program like this should end because of tax cuts. I believe that tax cuts shouldn't hinder the elderly, children, disabled, and handicapped who have their plates full enough now. This isn't fair to them. They didn't ask to be in the situation they're in. Let's not do this to them.

Let's give them some happiness, help, and comfort and keep this program alive and running!

April 22, 2003

To whom it may Concern:

I am writing in response to the information I received that CAP Transportation Services are to be cut due to budget constraints. I wish to state that I object to such budget cut because I am among those who utilize CAP Transportation Services for my medical care. The cutting of these services would greatly jeopardize my health care, as I would not be able to make my medical appointments.

Sincerely,

A Maine Resident

The tax cuts coming into affect on July 1, 2003 will be devastating to the majority of disabled, elderly, cancer patients, dialysis, mentally ill, developmentally delayed children, and low-income families. These people will not have the recourses to receive medical treatment due to no transportation. This decision of the legislature will without a doubt close the doors to all transportation services provided by Maine's Community Action Agencies. Losing these services will eliminate all non-emergency medical treatment to low-income families not fortunate enough to have their own vehicles. The transportation programs do not only supply transport to medical appointments but also family visits for the children and parents that no longer together. The bus services take the elderly shopping for food and household items, which allow them, be independent or the elderly that need to live with family the bus services transport these individuals to adult daycare services which allows the elderly to socialize with their peers and a respite for the family caregiver. Both the Volunteer Driver Program and the Bus Services provide transport for mentally challenged adults to day programs or work sites again to provide independence and self esteem to this community. The Volunteer Driver Program also transports children and parents for visiting and counseling appointments needed to reunite these families.

Below you will find the views of a few York County Residents that oppose this tax cut and how this will affect them.

Please do not take this very important funding from a program that is a lifesaver to York County. My children are transported to Kids Peace so that they may see their Dad. Without this transportation my kids would miss out on these visits, which are very important, to them. Above all I am very concerned that many residents of York County would have no way to receive the medical treatment to live a healthy lifestyle.

If I did not have YCCAC Transportation Program I would surely die as I have cancer and use this service to receive the medical attention I need to fight this cancer.

I need to have transport to Landmark Hill Counseling Services if I could not receive this counseling my mental health would decline and my life would be greatly changed due to no medical attention.

Over the course of two years I have been fighting to get my son back from DHS. I have had to use YCCAC for transportation to and from visits with my son. My visits and other needed programs are mandatory if I wish reunification with my boy. Please do not take away a lifeline to the betterment of my family.

If YCCAC were to close down the Transportation Program my quality of life would decline because I would not be able to receive medical attention and get the medications I need to sustain a healthier and productive life.

If it was not for the Transportation Program I would not be able to see my kids. I have regular visits with them in hopes to reunite my family.

If Cap was not available to me I would not be have a normal and good life. I need transportation seven days a week to a clinic so I can stay clean and sober. Please do not allow this service to cease.

I do not think you should take the funding away from YCCAC because a lot of people rely on the Transportation Program to receive medical treatment, family visits, grocery shopping, adult daycare, adult rehab, and school for developmentally delayed children. My children would not be able to have visits with their Dad if not for the Volunteer Driver Program. Please rethink this tax cut and restore the funding, as it is a much-needed service.

May 2, 2003

To whom it may Concern:

I am writing to you about the tax cuts to the MaineCare Transportation Services. I would have a very hard time trying to find a ride to my medical appointments because everyone I know work during the hours I would need to make my medical appointments. I would be totally lost without the service CAP provides for me. I am 100 years old and need to be seen by my Primary Care physician regularly and without the service Cap provides for me my health would be at risk. The services of Cap are much needed in Maine due to no public transportation.

Sincerely,

Marjorie Fisher

W. Newfield, Me

April 17, 2003

Governor John Baldacci

Re: Budget Cuts to Medicaid Transportation

Dear Governor Baldacci

I am gravely concerned regarding the budget cuts that have tanked funding away from Medicaid transportation, which is what I do. Without transportation many of our clients will be unable to avail themselves of necessary and urgent medical services. York County Community Action transport many people to dialysis, special needs children to pre-schools such as Spurwink, Sweetser, and Waban and sometimes Headstart. The drivers transport kids and adults in foster care and group homes to counseling, medical appointments, rehabilitation programs, and supervised parental visits.

Many of our clients are too elderly, too young or too ill to transport themselves and have no families that are able to transport them.

Without the continued services of volunteer driver program and bus services many of our clients would be at risk of certain death or definite decline in their state of health and/or well being. This need is not a frivolous need and without the services of the transportation programs throughout the state of Maine the quality of life will certainly decline.

I would appreciate your response and attention in this matter as soon as possible.

Sincerely,

Alice Bragdon

P.O. Box 72

West Kennebunk, Me. 04094

To whom it May Concern:

The Family and Friends of the transportation recipients feel that Governor Baldacci, Senators, and Legislatures are signing a double-edged death warrant. Being two crucial components to the proposal to cut transportation funding.

1. Being out of compliance with the Federal mandate to assure non-emergency transportation to all Medicaid recipients.
2. The second part of the Death Warrant is for mothers and fathers without the resources to pay for needed transportation for their families. Parents who cannot drive or do not own cars and need to receive medical services for their families. For families who have a loved one that needs daily medical treatment due to a life-threatening illnesses and the family members that are employed must continue with their employment as that is the only source of income to keep the financial commitments in these trying economic times. We urge the governor's office to figure out a budget to restore funding to continue transportation and other programs to support our elderly and needy citizens of Maine.

Carlton Candage, Cornish Maine
Catherine Mayo Limington, Maine
Priscilla Day Hiram, Maine
Mary Garland West Baldwin, Maine
Wesley Candage West Newfield, Maine

April 30, 2003

To whom it may concern:

I am currently attending counseling for Post-Traumatic Stress Syndrome and depend on the services provided by York County Community Action. Without this service I would not be able to get to my much needed counseling appointments due to no vehicle.

I live with my parents and my father's health is failing so my mother cannot provide a ride for me, as my father cannot be left alone for any length of time.

I suffer from severe depression and without constant treatment my mental health will be jeopardy. I implore you to please look at the budget once again and reinstate the funding for MaineCare Transportation Services.

Sincerely,

A Maine Veteran

May 4, 2003

To whom it may Concern:

I am a single mother in York County. I am opposed to the funding cut in the MaineCare Transportation, as this service is detrimental to the well being of low-income families. I have in the past used this service provided by York County Community Action and possibly could in the future.

A few years ago my daughter fell off her bike and pushed her two front teeth back into her gums, which was a bad and bloody injury. A trip to the emergency was needed but it was the follow up care that prompted the problem. My daughter had to see a specialist in Scarborough and I live in Sanford without a license to drive. Being a recipient of Medicaid I was able to call YCCA and request a ride for the follow up appointment in Scarborough. A Volunteer Driver came on the day of the appointment and made sure we arrived on time plus waited two hours to return us back to Sanford. Because I was able to receive the services of the specialist my daughter's teeth were saved and the injury to her mouth treated for infection and once again her smile was beautiful.

Since that time I have required my license and have a decent running car and enjoy giving back to my community by volunteering my car and time to the program that was so valuable to my family. I have had the privilege of working with some of the old timers, as we call them that came to my aid more than once plus meeting and helping the people of York County.

For sometime now I have been driving an older gentleman to a dialysis center in Biddeford three days a week. Due to an

incident that occurred last winter my client and I have been blessed with a very special bond. My gentleman has a blood pressure problem after his dialysis treatment and sometimes needs extra time and attention at the center. One cold winter night we were on our long journey to Parsonsfield when I noticed my friend was very quite as we usually gab all the way. I called his name and he did not respond pulling over to the side of the road I noticed he had some foam around his mouth and did not seem to be breathing. I have never had anything like this happen in my life and I was scared.

Realizing my friend was dying if not already dead I laid on the gas pedal properly too fast and started looking for lights between the trees. We were on one of the most desolated strips on Route 160 I finally saw a dim light through the trees and headed in that direction as fast as could. I pulled into the driveway honking my horn and flashing my lights. The family in the house came running and I told them to call 911 as fast as they could by now I knew my friend was in dire straights. The outcome to this story was a miracle and I still drive my gentleman to his dialysis treatment three days a week with a total different outlook on our relationship as driver and client. This was the scariest yet wonderful experience in my life and I would not have had it without the transportation program at YCCAC.

This is only one story of many that all of the drivers experience some without happy endings but to be involved in the human experience of helping one another in our time of need is the finale reward.

I cannot express how disappointed I am over the fact that once again the low-income will take a blow to the head. Please consider this tax cut because the devastation losing the Transportation Programs will have on the chronically and seriously ill in the State of Maine.

Maine. One never knows someday you or a family member may need the use of a program like YCCAC'S Transportation Program but it will not be there to help your family or other Maine families.

Sincerely,

Helene Patrick
Sanford, Me.

+

+

May 4, 2003

To whom it may Concern:

I have been involved with the Volunteer Driver Program for six years; during that time I have had the opportunity to help many deserving people.

The child in foster care who without this program would not be able to visit with their parents or siblings with hopes of reunification.

The child who needs special services to be able to grow and live a productive life whether it be physical therapy, speech therapy, or attending special classes.

The blind woman who is learning to use a computer hopefully to gain employment to support herself or learn how to take care of her own daily needs as washing, dressing something as simple as combing her hair. Without transportation this woman would not have the chance to better herself and become independent.

The elderly couple that can no longer drive or own a vehicle that needs help with transportation to maintain their medical needs or to go food shopping with the bus service.

The cancer patient too sick to drive yet needs medical treatment sometimes on a daily basis and without this treatment they would surely die.

So it is with great concern that I ask you to do whatever is necessary to reinstate the funding for the Transportation Programs throughout Maine.

Without the Volunteer Driver Programs/Bus Services many of Maine's residents will not receive these much needed services to maintain and normal and healthy life.

Sincerely,

Virginia L. Hasty

Porter, Maine

April 22, 2003

To whom it may Concern:

As a volunteer driver I am writing to let you know what our clients say and how much they appreciate what we do as volunteer drivers, and to let you know how much time and effort we put in. Without this service clients can't get to dialysis treatments, chemo treatment, or to doctors appointments, which are greatly needed, and clients lives depend upon.

Without our services children under BCFS care and parents of these children would be neglected. The communications between parent and child would be at a standstill. Children under BCFS and the parents depend on this service greatly. For some this the ONLY way they have contact with each other.

As a volunteer driver I'm very pleased to help those in need and to be able to offer this service. We go out in just about every kind of weather to get our clients to where they need to go. We also absorb the high price of fuel and put up with all kinds of setbacks [traffic jams, accidents, construction etc.] just to get our clients to their appointments.

We need to think of these people who are in GREAT NEED of this service and find another solution to cutting costs. Without this service people will be lost.

Sincerely,

Joe LeClair

Re: York County Community Action Transportation Program

Dear

It is my understanding that the York County Community Action Transportation Program will be dissolved as of July 1st due to lack of funding.

As a mother of a child with a disability, this program has been critical in giving my son access to special education services. When my son started his special education program, he was only able to speak one word and needed intensive physical and occupational therapy. Now my son can speak full sentences and needs only limited occupational therapy services. In the fall, my son will be attending regular school and has a chance of a very bright future. But, none of this could be possible without this transportation.

As a public health professional, I am very familiar with studies that demonstrate the importance of access to health services. These studies have shown that without access to services, there have been adverse outcomes for the people involved as well as to society as a whole.

The same principle applies here. By denying children with disabilities the necessary transport to attend early intervention programs, you impede access. Many children will not be able to attend these schools and will not get the intervention that they need to lead full productive lives.

Children, especially children with disabilities, cannot advocate for themselves. It is your responsibility as legislators to be a voice for them. Jeopardizing this transportation program is, in effect, jeopardizing many children's quality of life.

Please consider finding the funds to subsidize this program. There are children who need your help.

Best regards,

Louise C. Merriman, MPH
7 Guinea Road
Biddeford, Maine 04005



COMMUNITY CONCEPTS, INC.

Building opportunities for a better tomorrow.

Transportation
Housing
Children & Families
Innovative Programs
Small Business Development

May 16, 2003

Dear House Appropriations Committee Member,

I am writing to request your support in the reinstatement of \$214,091 targeted to cut the volunteer driver reimbursement rate from 30 cents to 28 cents per mile in the proposed Maine Care Transportation budget.

As Volunteer Driver Coordinator for Community Concepts Transportation, with responsibility for over 300 volunteer drivers, I am gravely concerned over the potential impact this reduction could have on transportation services in Maine. A reduction in volunteer drivers would not only affect Maine Care transportation but could also degrade services to other consumers.

Volunteer drivers provide services from door to door, essential for those in rural areas away from bus or other agency vehicle routes, and provide personalized assistance to those not physically able to enter in and out of their homes and treatment facilities. These volunteers also give passengers in crisis or those suffering from serious injury or illness the comforting support needed during their difficult times.

Children in protective custody and/or children that fall under the Bureau of Child and Family Services are almost exclusively transported by volunteer drivers to facilitate the Department of Human Services mandate of providing one on one transportation by a driver who has attended the Children's Transportation Workshop along with other required training.

With over 229,000 residents enrolled in Maine Care, volunteer drivers are an integral and critical element of Maine's transportation infrastructure.

Utilizing a volunteer driver is the most efficient means possible provide access to health care for a patient who does not have the means to either transport themselves or find a friend or family member to give them a ride.

- Rides provided by Maine volunteers generally cost much less due to volunteers waiting for patients and eliminating the need for an additional trip to return the patient.
- Mileage rates are .30 for volunteers and .68 for agency vehicles

- In 2002 volunteer drivers' donated time provided \$3,940,633 worth of service to Maine citizens. This is based on a rate of \$8.18 per hour as reported by the Maine Commission for Community Service for calculating the labor value of a driver. This includes 220,000 hours driving time and 261,740 hours waiting time for patients at appointments. Obviously, a huge savings to the taxpayer.
- Volunteer drivers have only received one mileage reimbursement rate increase in the last 20 years and are still 4.5 cents below the IRS allowable rate and 2 cents below state employees, while the cost of operating a vehicle continues to rise and is currently at an average of 43.9 cents per mile according to the American Automobile Association.

In summary, Maine volunteer drivers provide an extremely efficient method of providing transportation services and are dedicated individuals serving their communities, state, and country. It would be financially imprudent not to restore funding at current levels for volunteer driver reimbursement. Every volunteer driver that was lost due to mileage reimbursement rate cuts would ultimately result in increased costs per unit by having to fill that ride with a paid driver that was an employee and pay a higher mileage rate, or worse deny access to health care to a rural resident because an agency vehicle was not available or would be cost prohibitive.

Finally, I feel it would be morally and ethically wrong to send a message that these volunteers are not valued or appreciated and that Maine does not support or encourage volunteerism, which is exactly the message that would be sent if the proposed cut stands.

Thank you for your anticipated support and please feel free to call me if you have any questions at:

795-6073 office

786-2554 home

462-3790 cell

Respectfully,

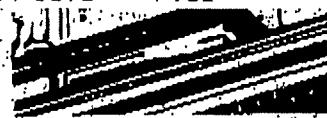


Mark J. Caffiso

Volunteer Driver Coordinator

Community Concepts Transportation Department

RUMFORD



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April 16, 2003

State budget cuts may put transportation for seniors at risk

by Abbey Casás Rice

REGION — For seven years, Diane Hamilton of Mexico volunteered for Western Maine Transportation Services as a driver, taking people to doctor appointments and on other necessary errands.

These days, however, due to a spinal cord injury in December of 2002 that has left her numb from the waist down, Hamilton is in need of transportation herself, as often at three times a week, to doctor appointments and physical therapy appointments.

But as of July 1, Hamilton may find herself out of luck if she calls Western Maine Transportation to schedule a ride.

Both Western Maine Transportation and Community Concepts, non-profit agencies that provide ride services to MaineCare (Medicaid) recipients, are in danger of drastically reducing or even eliminating those services due to major budget cuts in the 2004-2005 state budget, which goes into effect July 1.

"July 1, things could potentially stop," said Eugene Skibitsky, general manager of Western Maine Transportation.

Western Maine Transportation's regular "green bus" service would be unaffected.

Community Concepts spokesperson Mary Ellen Theriault predicts a similar fate for her agency if the bud-

get cuts go into effect as planned.

"We could close down (the transportation department)," she said.

Stopping transportation services for MaineCare recipients would have a devastating effect on many individuals, said Theriault.

"For some people, this can be life saving," she said, noting that some of their clients rely on the service to transport them to kidney dialysis appointments, radiation treatments or other appointments.

"These are vital services," Theriault continued. "We are desperately hoping that someone (at the state level) will realize that this was a terrible mistake."

The state budget for 2004-2005 has cut \$600,000 in MaineCare transportation funds, but those cuts translate into a total loss of \$1.8 million dollars when the loss of federal matching funds is factored in.

Both Community Concepts and Western Maine Transportation rely on volunteer drivers to transport their clients. The volunteers are reimbursed from MaineCare funds 30 cents a mile for gas and the use of their vehicle.

Community Concepts, which serves Androscoggin, Oxford and Franklin counties has about 300 volunteer drivers, while Western Maine Transportation has about 100.

Community Concepts provides

See CUTS on Page 3



COMING TO AN END? — Phil O'Brien, Community Concepts driver, helps client Diane Hamilton out of his car as they arrive for MaineCare recipients like Hamilton may be affected by budget cuts. (photo by Abbey Casás Rice)

Sacrifices made as Mexico tries to hold the line

by Bruce Farrin

MEXICO — Tough economic times mean tightening the belts, and certainly the selectmen and Budget

town's share to SAD 43 or the county tax, both of which have not been determined.

In comparison to the 2002-03 budget, which was based on a SAD 43

motion that they halve that to just 1 percent.

"There's a couple people out there wondering why 1 percent. Well, last year we worked hard on a budget

Derouche also can't way to save money to bring his salary over the line.

He said "My cure is \$50,000 (based on a

Times

003

Two Sections

50¢

ut end to s, others



Concepts volunteer, helps former volunteer turned ve at Rumford Hospital for an appointment. The come to an end due to state budget cuts. (Times

Transportation cuts would put state out of compliance

by Abbey Casás Rice

REGION — With huge budget deficits to contend with, Maine lawmakers have had to make tough decisions about where to make cuts in the 2004-2005 budget.

But some say that cuts in transportation services to MaineCare (Medicaid) recipients could land the state in hot water with the federal government.

A press release from a coalition of nine transportation providers across Maine contends that the \$600,000 cut (which translates into a total loss of \$1.8 million, including the loss of federal matching funds) would put the state "out of compliance with the federal mandate to assure non-emergency medical transportation for all recipients."

Further, because state funds are used to transport some children to counseling and other court ordered child welfare mandates, the state would be out of compliance with those court orders.

"The feds could shut down the MaineCare/Medicaid program," said Eugene Skibitsky, general manager of Western Maine Transportation Services.

"It could happen."

Skibitsky is concerned that if the federal government were to step in to try to correct the situation "it could be a hell of a lot more expensive" than what is in place currently.

At press time, no one from MaineCare could be reached for comment.

The threat of being out of compliance with federal guidelines and court ordered mandates could be avoided if lawmakers choose to restore at least some funding through a supplemental budget process before the 2004-2005 budget goes into effect on July 1.

Glenn Gordon, director of community relations at Western Maine Transportation said that he "feels hopeful" that some additional funds could be found.

"The response (out of Augusta) seems more positive in the last week," he said.

Gordon and others in the transportation sector hope that legislators see that their work "has a real impact," and is urging those affected by the cuts to contact their legislators and ask them to restore the funding.

line Falcon teams expand to take on JV softball, baseball players

up with a
he town pay-
ext year.
nt salary is

from Page 1

dation by the he Budget Chief Gary be paid the approved, gone r cost when way from his a call, which 155 hours. as cut out was to do the pick-nup. The town, had this service with this year e cost is gener-0.

not decreased, waste increased \$187,778, with e to increase to Regional Solid an increase in er ton) assessed landfill. vere insurances, 220,000. reduction in the little margin for encies as the is reduced from nt budget to just f business at the our session was ts of \$5,000 each o Trailblazers b and the ATV the request with owards grooming maintenance. member Herb funding was espe-ear as an oversight

led to missing out on a club grant.

Selectman Louise Waterhouse said that given the economic times, she made a motion to support giving \$2,500 to each club.

However, Selectman Barbara Laramée said that because the board had opted not to give money to several social service agencies earlier, they should follow through with that idea with these clubs.

The motion was then defeated by 2-1, with Chairman Reggie Arsenault electing to abstain. The Budget Committee then voted 6-0 to raise zero dollars.

Derouche said the Mexico Trailblazers do bring economic value to the community. "The zero that was recommended, I would never promote that because they do a lot for the valley. They have events that go on, like Blessing of the Snowmachines; that brings dollars into the valley. The bottom line is about the bottom line this year. It's as simple as that."

When asked about the effect of not getting the request to the town, Campbell said it would likely impact how well the 40 miles of trails in the town are maintained.

Like the other agencies, this zero dollars for these two clubs will not appear on the warrant for the June 9 town meeting.

The only way to get it on the warrant is by petition, which Campbell said he would do. A successful petition will requires at least 106 signatures of residents, which represents 10 percent of the registered voters who cast votes in the last gubernatorial election. Deadline for all such petitions is May 16.

TRANSPORTATION pg 3

about 3,000 rides a month out of their Rumford office alone, while Western Maine Transportation made about 65,000 trips last year.

Charlie Ames, a volunteer with Community Concepts for about a year, is concerned about the effect that the cuts would have not only on the clients, but those who serve them as well.

"From my perspective, this affects a lot of people in a lot of ways — the volunteers, the elderly, the disabled."

For Ames, who is disabled and unable to work a regular job, being able to drive clients is important to him.

"It gives me a feeling of contributing," he said.

"It's a fulfilling part of my life. It's something I can do and I can set my own pace."

Phil O'Brion, a driver for Western Maine Transportation, also finds volunteering to be an important part of his life.

A retired Radio Shack store owner from Jay, O'Brion volunteers five days a week.

"I enjoy it. I meet a lot of nice people, and it's something you can do."

As much as the volunteers would miss the opportunity to contribute, the more devastating effect would undoubtedly be on those who will no longer be able to make it to necessary appointments.

"I really can't believe they're doing this to us seniors," said Mexico resident Lois O'Leary.

O'Leary has rheumatoid arthritis and cancer, making frequent trips to doctors and specialists as far away as Portland a necessary part of her life.

Because she is on an extremely tight fixed income, affording a car is out of the question and does not

know what she will do if Community Concepts ends its transportation program.

"I have no idea. I truly don't have any idea."

After paying her rent, O'Leary has less than \$300 left every month and "there isn't much there for taxis."

"I truly do depend on Community Concepts."

If transportation services were to end at the two local agencies, some of the burden might be shifted over to the rides program at SeniorsPlus, said SeniorsPlus Community Relations Manager and Transportation Manager Cathy Planchart.

The SeniorsPlus program operates differently from Community Concepts and Western Maine Transportation in that it provides non-Medicaid reimbursable rides for seniors in Androscoggin, Franklin and Oxford counties.

Although its costs are low compared to a conventional taxi service, even that is beyond what some seniors can pay, said Planchart.

"If the MaineCare transportation services dry up, the demands on our program would dramatically increase and we would have a difficult time meeting the need with our limited capacity, and may potentially have to discontinue providing rides so as to keep the program from being operated at a loss," Planchart noted.

"The MaineCare dollars are vital," said Wayne Van Blood, transportation director at Community Concepts.

"We do understand that the state budget has to be reduced," he said, "but I think they've gone overboard with this particular line item."

"We save a lot of people's lives. Daily."

RUMFORD -- Recently, the Hotel Harris announced the appointment of Andrea MacDonald as the hotel's new general manager. She has a degree in hotel management from the Harris management program in Rumford.

Woodstock Elementary School, Mrs. Fordand, Jean Lawrence (3rd place locally), Crescent Park School, Mrs. Kuzyk, Samantha Tibbels, Taylor Maines (Honorable Mention), Mrs. Jerome, Nick Allen, Ms. Davis, Jamie Steven, Rumford Elementary.

This campaign consisted of daily posters being displayed in the schools that simply said 92 percent with new posters going up each day with a "clue" as to what the percent stood for. On April 4 students discovered that 92 percent of Maine Youth "Don't think that it is cool to

passed over the years. In her mother's day, "many of the people died in their 40s and 50s," Lapham said.

Lapham collected the clippings informally — she simply put them in a box.

a box, but expanded the project, adding articles and photos on a wide variety of subjects.

She gathered clippings primarily from the Lewiston Sun, the Rumford Falls Times, the Bethel Citizen, the Portland Press Herald,

only.

In the 1950s, Lapham herself took an interest in the effort. She clipped items several times a week, adding them to the boxes. "We

See CLIPPINGS, page 4

on victory

in Iraq before raising Ameri-

rather than raise the flags

th local Legionnaires Jeri and Richard Farren.

st of those present at Mon-

flags up, but those flags, like we still have people get-ting something we want to, perhaps a week when the presi-the war as opposed to a glar-

the town's ability to keep a condition.

American flag flying as of said: "If we can't take care of going to take care of a whole

and and nearby tree limbs, being lowered. Local Le-were able to replace it so raised.)

State budget cuts could strand bus riders here

By ALISON ALOISIO

Local residents who rely on a volunteer driver program to take them to medical appointments and other services may have to look elsewhere for a ride, following recent state budget cuts.

Both Western Maine Transportation Service and Community Concepts provide rides for Bethel area residents. Transportation is offered for needs ranging from medical treatment and appointments to services for foster children and other children with special needs.

Under the program, volunteer drivers donate their time and vehicles, and are reimbursed 30 cents a mile. They do not receive any other compensation.

Funding comes through the Maine Department of Human Services. But a \$1 million cut in the statewide service is included in the Maine budget for the next fiscal

year. If it goes through as written, an additional \$2 million in matching federal funds would also be lost.

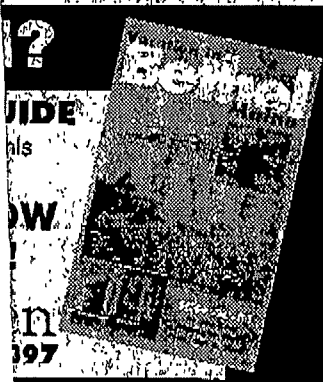
Lynn Mason Courtney of Bethel said the service was invaluable to her and her late husband, John, who suffered from kidney disease. A volunteer driver from Community Concepts transported him three days a week to Lewiston for kidney dialysis, as well as to regular doctor appointments.

"The transportation office, besides being a support service, became like a family to us," Courtney said.

She is legally blind and was unable to drive him herself. "John wouldn't have lived as long as he did if it hadn't been for the transportation," Courtney said.

John died last year.

See TRANSPORTATION, page 4



Jazz and Cocktails

Sat. Apr. 19

The Sudbury Inn

An evening of

your favorite jazz standards

Main dining room, 7-10 PM

Performed by *Those Jazz Guys*

On piano, saxophone, bass & drums

\$6 cover benefits Mahopusic Arts

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Amplifier

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SE

April 13 - 12-4

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--	---	---	--

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Bethel Citizen 4/11/03

1971, over the vehement objection of town officials.) The site was eventually cleaned up, at a cost to taxpayers of \$773,250. In 2001, the town of Greenwood closed on the 34-acre tire-dump for Gordon's failure to pay

however, the town could not close on the 2.2-acre parcel on which the trailers sit, because it is owned by Gordon, but by his ex-in-law, Sally Ann Haley of New York.

THE ENVIRONMENT NOW



D. Jacob A. Ledesma, M.D.

Treatment of:

Happy, having a mastectomy in the early 1970s — and going public with it.

"No one talked about it in those days," said Lapham, and it was a turning point in encouraging

by the end of the 1970s, Lapham had "boxes and boxes" of clippings stored away at the back of a large closet in her house.

"I never had time to put them together (in a organized way) while

because the old clippings often lead her to reread them. "I'd get done faster if I didn't have to peruse each article," she said. "You can get addicted to it. The time goes by,

woodstove.

Will her gluing keep pacing will her collecting from now on?

"You better believe it," she said.

Transportation

Continued from page 1

Courtney now worries about the impact of possible service cutbacks on other people in the Bethel area.

"I find it so scary that people can't get to the services they need," she said.

Courtney said she knows of others in the area, including children, who use the ride service. Because of confidentiality, they are not identified by the agencies.

The Courtney's former driver, Walter Moyce of West Paris, has been a volunteer for four years. He drives everyone from young children going to Headstart to an 80-year-old diabetic woman who is

nearly blind. Many of the riders are served through Medicaid, he said.

Moyce said his older clients would likely suffer the most with any cuts. "They wouldn't be able to go anywhere," he said. Some of them know that cuts are possible, he said, "and they're very upset."

Moyce said he continues to drive for a Bethel woman with a medical condition. He often drives people to Portland for medical treatment, he said. He averages about 20,000 miles a year.

If the program is cut, he said, "I can't afford to do the rides for nothing."

Looking for other funds

Wayne Van Blood is the transportation director for Community Concepts, which provides services for Oxford, Androscoggin and Franklin counties.

In Oxford County, CC provides approximately 1,200 rides a week, through about 120 volunteer drivers, he said.

Gov. John Baldacci, speaking on a radio program last week, said he believes the transportation agencies can save money and still deliver services by regionalizing their administration.

Baldacci said that currently the multiple agencies have separate administration and billing processes, which, he said, cut into the Medicaid reimbursement they receive.

But Van Blood said Community Concepts' process is efficient. "We have a good billing service. It's all computerized," he said.

Van Blood said his agency learned of the planned budget cut four weeks ago at a hearing in Augusta.

A \$1 million cut, he said, "will drop the (Medicaid reimbursement) rates so low no one can run the service."

He said an effort is currently in the works to transfer about \$400,000 from another Human Services account to transportation

services to help fill the budget gap. Such a move would generate more matching federal funds, he said.

But Gene Skibitsky, general manager for Western Maine Transportation, said even that may not be enough. Unless other sources of funding can also be found, WMT may have to discontinue the volunteer program.

"We would have to reduce services," he said. "It's too bad, but cause that's the one that helps the people the most."

A coalition of nine transportation agencies from across the state working together to try to secure other funds.

Buses would continue

Such cuts would not affect the bus transit service WMTS provides. The green buses are funded through the Maine Department of Transportation, which did not see significant cuts, Skibitsky said.

Also escaping the cuts, he said, the Mountain Explorer bus service in the Bethel area. For the past two winters, the bus has provided transportation for Sunday River Ski employees, skiers and anyone else wishing to ride it.

State funds helping to support the bus are also provided through MDOT, he said.

It's Coming Soon!

Telstar
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Lake Region
Mountain Valley
Fryeburg Academy
Oxford Hills

May 3
May 3
May 10
May 10
May 17
May 17

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OPINION

JAMES R. COSTELLO
Publisher, General Manager

REX RHOADES
Executive Editor

Sun Journal

OUR VIEW

Using bias to quash civil rights

Harassment and violence based on sexual orientation is a violation of the Maine Civil Rights Act.

The Christian Civic League of Maine may not like that, but it is the law.

That means the Attorney General's Office is entirely within its authority to hold a conference today to teach high school students how to recognize and respond to discrimination based on sexual orientation, just as it may teach the same techniques to stop discrimination based on race, religion, physical or mental disability and nationality.

Michael Heath, executive director of the Christian Civic League of Maine, is making it his personal goal to close down Civil Rights Teams now in place in hundreds of Maine's public high schools. He does not believe taxpayer funds should be used to teach tolerance for homosexuals, or what he considers "gay" propaganda.

Oddly, with our nation's proud history of separation of church and state, an equal argument could be made that taxpayer funds must not be used to teach religious tolerance.

Heath, who plans to attend the conference, has expressed concern about two workshops that deal with tolerance regardless of sexual orientation. That is the same number of workshops organized to explore tolerance for religious beliefs, which

Rides are vital

Gov. Baldacci's human services transportation budget cut will leave the elderly and children in rural areas without transportation to vital health care, educational and social service appointments.

Gov. Baldacci's \$600,000 cut in the MaineCare Transportation Budget and the subsequent loss of \$1.2 million in matching federal funds will be the most devastating to those who live in rural areas and rely on non-profit transportation agencies to get to more populated towns where services exist.

In rural communities the options are frequently limited to regional full service transportation providers. There is nothing else available. The logistics and cost of providing transportation in rural areas discourage private enterprise from setting up shop outside of the service areas.

The cuts in the MaineCare budget create a financial strain on the non-profit provider that may force them to pull off the road.

In Western Maine, Western Maine Transportation Services and Community Concepts Transportation provide MaineCare and Department of Human Services transportation through a network of agency vehi-

cles, public transportation services and volunteer drivers. Both agencies have stated that the cut may cause them to close up shop.

The reductions in funding will impact rides for 40,000 children, elder-

In rural communities the options are frequently limited to regional full service transportation providers.

ly and disabled Maine citizens and prevent them from accessing critical services including dialysis, child care, mental health, cancer treatments and other critical services.

A window of opportunity exists when the Legislature reviews and approves a supplemental budget. I am the director of community relations at Western Maine Transportation Services and I know we need MaineCare transportation.

Glenn Gordon, Hanover

Liability suits

During this fog of war, and not last

IRAQIS CEL



untreated municipal and industrial wastes.

So what can you do to protect water at home?

1. Be conscious on a daily basis how important water is in your life; it takes water to grow our food, make the products we use, and often is where we go to swim, fish, relax.

2. We're more likely to notice leaky faucets indoors, but don't forget to check outdoor faucets, pipes, and hoses for leaks.

3. Turn off the water while you brush your teeth, shave, etc.

4. Take short showers and install low-flow showerheads. These actions can make a huge difference in your water consumption.

The information for this edition of In Our Backyard comes from the International Year of Fresh Water 2003 website. You can visit the website at www.unesco.org/water/iyfw2/index.shtml

This column was submitted by Marianne Dubois, a Geologist with the Maine DEP's Bureau of Land and Water Quality.

In Our Back Yard is a weekly column of the Maine Department of Environmental Protection. E-mail your environmental questions to infodep@state.me.us or send them to In Our Back Yard, Maine DEP, 17 State House Station, Augusta, ME 04333.

Editor

Governor's budget cut in transportation devastating to many elderly

To the Editor:

Governor Baldacci's human services transportation budget cut will leave the elderly and children in rural areas without transportation to vital healthcare, educational and social service appointments.

Governor Baldacci's \$600,000 cut in the MaineCare Transportation Budget and the subsequent loss of \$112 million in matching federal funds will be the most devastating to those who live in rural areas and rely on nonprofit transportation agencies to get to the more populated towns where the services exist.

This photo shows F. Allen Richards at the gas pump in front of his garage is courtesy of the Mexico Historical Society

In rural communities, the options are frequently limited to the regional full-service transportation providers. There is nothing else available.

The logistics and cost of providing transportation in rural areas discourage private enterprise from setting up shop outside of the service areas. The cuts in the MaineCare budget create a financial strain on the non-profit provider that will force them to pull off the road.

In Western Maine, Western Maine Transportation Services and Community Concepts Transportation provide MaineCare and Department of Human Services transportation through a network of agency vehicles, public transportation services and volunteer drivers.

Both agencies have stated that the cut may cause them to close up shop. The reductions in funding will impact rides for 40,000 children, elderly and disabled Maine citizens and prevent them from accessing critical services including dialysis, childcare, mental health, cancer treatments and other critical services.

A window of opportunity exists when the legislature meets to review and approve a supplemental budget. If you rely of public transportation, I would encourage you to contact the Governor or your local legislator to tell them to vote to restore funding for MaineCare transportation.

Glen Gordon,
Western Maine Transportation Services

Thanks for donations

To the Editor:

The Rumford Head Start 0-5 would like to thank organizations for their donations to our Good Guys in Head Start Dinner.

The donations were used as door prizes following our dinner and conversation with our facilitator, Paul Marsh, who spoke of the challenges of parenting.

Those donating items were Ambuchon Hardware, American Ski Corp., the Greater Rumford Community Center, Wal-Mart, Mt. Blue State Park, Subway, Hannaford, Rite Aid, Torpedo and the Parent Groups of the Head Start Programs.

The Chisholm 0-5 Program

Mexico town officials were made

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My name is Cindy I DRIVE for Community Concepts as a Volunteer DRIVER. WE have been told that The Governor is going to cut the Budget for transportation Services. I understand that the budget must be fixed. But at what cost. Yes things look good on paper. The figures will work out. But I would like to take this to a higher statute the human side of the Transportation issue.

This cut will affect 40,000 children, elderly, and other areas. Who is going to tell the Blind person in Turner that they no longer ^{have} transportation. How will this person get to appointments DRIVE them self or the Kidney Dialysis patient sorry no transportation for you, they have no way of getting there. Did you know if they don't go there life will end. They can't walk. The mental challenged person in Littlefield who will tell them they can no longer go to ~~the~~ there classes to help them function in our world. Remember that some day there parents are not always going to be there then how do they function in society if you cut this program

What are you going to tell the children when they can't go see mom or dad? Sorry but if you are in the 6th grade we will give you a lap top computer instead. Do you really think that this will work.

So if you think this cut will not affect anyone you are wrong. Maybe those that sit and

work this out on paper. should take time to explore the very human side. Why don't you enter there world ~~this~~ drive some of them around to there appointments and see the real need Hands ON instead of just by numbers.

Yes there is other transportation such as cabs and busses. When you live on a ~~limited~~ Limited budget can you afford 1.25 or more per 1/4 mile for a ~~taxi~~ taxi or need of Dialysis wait for the bus and ride a long time. They are tired and ~~re~~ exhausted by the time kidney Dialysis is over. Who will help them. Are we going to send a child on the bus or in a taxi to see there parents not knowing what will happen to them.

Please think about these cuts from the Human side before you end these programs, and possibly someones life. This transportation program is very important to Many Human Life. Make your cuts some where ~~to~~ else and save a life. Maine motto is Maine the way life should be cutting this program is not the way it should be.

Cindy Tufts

pp2

My case managers time is wasted sitting and waiting for me while I go to the bank or small stores. She gets paid good money so it shouldn't be wasted on helping me do errands. I need her for other problems and with her help I am becoming more independent but without ppt. It's not being put to good use. She's teaching me how to lead as normal a life as is possible but once I learn things I need the use of ppt to keep moving ahead and not stay in old patterns. I now get to go out 1 out of 7 days and it's making it harder and harder on me mentally to just go out that 7th day. I'm becoming scared of people again and am getting afraid to go even that one day. I don't want to go backwards like I am now because of no ppt. I've gained a lot of ground with my case manager but she can only do so much for me. I need to do the work myself or her teaching me is for nothing. We're mentally ill so we have a lot going against us already and without ppt it makes it that much harder on us. We try to live as normal as possible but without ppt we get nowhere. Sincerely yours

Noire J. Stone

Pg 1

and community concepts KID'S

By having the use of P.P.T. I can save myself \$15.00 a week I would have to pay C.C. to take me grocery shopping. That's \$60.00 per month out of my pocket. I am just learning (from my mental health case worker) how to shop for myself. She and I could use our time together a lot more wisely than having to take me shopping once I'm independent enough to go alone with P.P.T. I have recently switched supermarkets and this month alone I have saved over \$100.00 on my grocery bill. Now if I become independent I'm going to lose \$60.00 out of my \$100.00 I saved by switching stores because I have to pay C.C. \$15.00 a week to take me shopping. That's money I could put to better use. I support myself and a house on my SSDI and that \$60.00 sure would come in handy with the ~~price~~ price of oil and utilities going up all the time. I live month to month on SSDI. The only rides I can go on now are either paid by medical or with my case manager, with P.P.T. I have a lot more freedom to get to the bank and stores.

STOP TRANSPORTATION FUND CUTS

As some you know, The Governor's Budget reduction plan for Maine residents results in Mainecare Transportation Funding Program losing up to \$1 Million dollars. As well as a reduction of close to \$2 Million dollars from the Federal matching Medicaid fund.

If these reductions take place, Full services transportation providers, such as Western Maine Transportation, and Community Concepts Transportation Programs would be forced to close their doors. There are more than 40,000 children, elderly, and disabled residents in Maine that depend on these programs everyday. Some people going to high risk appointment like Cancer Treatment Clinics, and Dialysis. Children being transported to childcare facilities, Child Development services, Mental Health Services for troubled youths and children. There have been over 375,000 hours donated by volunteer drivers to transport residents to and from appointments, and all they ask is reimbursement of fuel.

What most of the Politicians in Maine seem not to understand is that not all of Maine residents are fortunate financially. Most of them are working class people with large families and not always enough money to support their growing families hopes for the future. These people don't always like to but at some point through it all they have to ask for help. And have to be reassured that when it is needed the help will be here. A lot of people have to depend on programs like Western Maine Transportation and/ or Community Concepts Transportation to keep their lives on track, others use them as devices to help them through hard times till they can get things straightened back out as normal as their lives and be expected to be in the long run.. With out these programs they would not be able to keep up with Doctor appointments, Therapy appointments, or even visitation with their children, If by some chance the Department of Human Services, has taken their children till they can make their home and or environment a safer place for the children to be brought up in. DHS to Whom also use transportation programs in everyday work environments transporting children in the custody of Human Services back and forth between Foster Homes and visitation facilities so that the transition between foster homes and parents Homes are not as trying on the child's or the parents' mind.

If they pass this reduction in the State of Maine Budget, many of Maine residents will be without transportation that has always been offered to them in case of emergency or low income families. Maine is supposed to be a great place to work, live, and raise a family. But how are we to teach our children the right things to do in life, if we do not first teach them that we have to help our less fortunate residents as well as our wealthier more prominent ones.

If indeed, The State of Maine, passes this reduction. They will be out of compliance with Federal Mandate to assure non-emergency medical transportation for all Mainecare recipients.

In closing Please sign this Petition to Stop Reductions in Maine Transportation Funds..

Maybe your someone you know has had to call upon these services in a great time of need. What would have happened if the Program was not available at the time when it was needed???

Thank you for your Time, Consideration, and Patience with me, and OUR issue...

Sponsored by:

In conjunction with Volunteer drivers for Community Concepts Transportation Services and Clients.

AMC032803

William R. Tolson New Portland
Bessie L. Hiscour Farmington
Roger Bailey
Harriet Johnson New Portland
Lynn Meader Farmington
Jeff Lang Farmington
Violet Cushman Chesiville
Archie Cushman Chesiville
Lisa Meader Farmington
Temple
Tina Handley Canton
Chris Handley Chesiville
Shirley Meader
TOPSON

Heidi Tolman New Portland

Kim Dean Canon

Heather Lopiccolo

Cathy Lopiccolo

) Mass.

Sue Genovese Mass

Chris Genovese Mass

Scott Tolman Mass

Lisa Laurie Dover New Hampshire

Terri Hubbard New Portland

Lewy O Gordon S.R.
Alberta Gordon Wilton