LD 265

- Engrosser from similar bill, LD 1957 (129th)
 - o Unanimous OTP-A
 - o Died on adjournment
- Substantive differences from current bill are highlighted

STATE OF MAINE

IN THE YEAR OF OUR LORD TWO THOUSAND TWENTY

H.P. 1401 - L.D. 1957

An Act To Provide Women Access to Affordable Postpartum Care

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

- **Sec. 1. 22 MRSA §3174-G, sub-§1, ¶A,** as enacted by PL 1999, c. 731, Pt. OO, §1, is amended to read:
 - A. A qualified woman during her pregnancy and up to 60 days 6 months following delivery when the woman's family income is equal to or below 200% of the nonfarm income official poverty line;
- **Sec. 2. 22 MRSA §3174-G, sub-§1, ¶G,** as amended by IB 2017, c. 1, Pt. A, §2, is further amended to read:
 - G. A person who is a noncitizen legally admitted to the United States to the extent that coverage is allowable by federal law if the person is:
 - (1) A woman during her pregnancy and up to 60 days <u>6 months</u> following delivery; or
 - (2) A child under 21 years of age; and
- Sec. 3. Federal Medicaid waivers or state plan amendments; cost neutrality. The Department of Health and Human Services shall, no later than January 1, 2021, submit requests for any waivers or state plan amendments to the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services determined necessary in order to accomplish the purposes of this Act. The department shall take all reasonable and necessary steps to seek approval of the waiver or state plan amendment. The department shall demonstrate cost neutrality in the waiver or state plan amendment, including, but not limited to, using savings from premium tax credits on health insurance obtained through the health insurance marketplace for which MaineCare members receiving services under this Act would be eligible, savings on limited family planning coverage and any other source of savings.
- **Sec. 4. Funding.** In order to implement those sections of this Act that amend the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G, if

the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services does not grant a waiver or state plan amendment under section 3, the Department of Health and Human Services shall use federal funds first, if allowable under federal law, and then shall use the General Fund.

- **Sec. 5. Rulemaking.** Within 180 days of receiving a decision regarding coverage by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services pursuant to a request in accordance with section 3, the Department of Health and Human Services shall adopt rules to implement the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G. Rules adopted pursuant to this section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. Upon adoption of the rules, the Commissioner of Health and Human Services shall notify the Secretary of State, the Secretary of the Senate, the Clerk of the House of Representatives and the Revisor of Statutes.
- **Sec. 6. Report.** The Department of Health and Human Services shall report quarterly to the joint standing committee of the Legislature having jurisdiction over health and human services matters, beginning April 1, 2021, on the department's progress in seeking a waiver or state plan amendment under section 3 until the process is complete. The joint standing committee of the Legislature having jurisdiction over health and human services matters is authorized to report out a bill to the Legislature regarding each report.
- **Sec. 7. Effective date.** Those sections of this Act that amend the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G take effect upon the adoption of rules pursuant to section 5.