



127th MAINE LEGISLATURE

LD 524

LR 861(01)

An Act To Start a Pilot Program for Medical Substitution Treatment in a Local Community Setting

Preliminary Fiscal Impact Statement for Original Bill

Sponsor: Sen. Gratwick of Penobscot

Committee: Health and Human Services

Fiscal Note Required: Yes

Preliminary Fiscal Impact Statement

	FY 2015-16	FY 2016-17	Projections FY 2017-18	Projections FY 2018-19
Net Cost (Savings)				
General Fund	\$41,769	\$0	\$0	\$0
Appropriations/Allocations				
General Fund	\$41,769	\$0	\$0	\$0
Federal Expenditures Fund	\$125,308	\$0	\$0	\$0

Fiscal Detail and Notes

The Department of Health and Human Services will require a one-time General Fund appropriation of \$41,769 in fiscal year 2015-16 for technology changes to the Maine Integrated Health Management Solution to allow new providers and structure of methadone services. Federal Expenditures Fund allocations will also be required for the FMAP match.

This fiscal impact does not assume any savings from transportation costs. First, the current transportation structure in MaineCare pays a per member per month rate for all members, so any savings would not be accounted for in the current biennium. Second, it is hard to determine what might be saved, since the bill calls for a pilot program and licensure of federally qualified health centers (FQHC), but it is not known where the pilot would be located or which FQHC's would get licensed and thus which members would be impacted. Also, this impact assumes no increase in methadone services, simply a shift in who is providing the service. Lastly, there would be additional revenue for any newly licensed facility, but it is unknown how many of the federally qualified health centers would apply for a license.