

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

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

PART A

Sec. A-1. 22 MRSA §3174-G, sub-§1, ¶F, as amended by PL 2011, c. 380, Pt. KK, §2, is further amended to read:

F. A person 20 to 64 years of age who is not otherwise covered under paragraphs A to E when the person's family income is below or equal to 125% of the nonfarm income official poverty line, provided that the commissioner shall adjust the maximum eligibility level in accordance with the requirements of the paragraph.

(2) If the commissioner reasonably anticipates the cost of the program to exceed the budget of the population described in this paragraph, the commissioner shall lower the maximum eligibility level to the extent necessary to provide coverage to as many persons as possible within the program budget.

(3) The commissioner shall give at least 30 days' notice of the proposed change in maximum eligibility level to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs and the joint standing committee of the Legislature having jurisdiction over health and human services matters; ~~and~~

Sec. A-2. 22 MRSA §3174-G, sub-§1, ¶G, as enacted by PL 2011, c. 380, Pt. KK, §3, is 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 following delivery; or

(2) A child under 21 years of age;

Sec. A-3. 22 MRSA §3174-G, sub-§1, ¶¶H and I are enacted to read:

H. Beginning January 1, 2014, a person 21 to 64 years of age who is not otherwise eligible for medical assistance under this section, who qualifies for medical assistance pursuant to 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) and who has income at or below 133% of the nonfarm

income official poverty line plus 5% for the applicable family size as required by federal law. A person eligible for medical assistance under this paragraph must receive the same coverage as is provided to a person eligible under paragraph E; and

I. Beginning October 1, 2019, a person 19 or 20 years of age who is not otherwise eligible for medical assistance under this section, who qualifies for medical assistance pursuant to 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) and who has income at or below 133% of the nonfarm income official poverty line plus 5% for the applicable family size as required by federal law. A person eligible for medical assistance under this paragraph must receive the same coverage as is provided to a person eligible under paragraph E.

Sec. A-4. Contingent repeal. The Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs H and I are repealed if:

1. Enhanced Federal Medical Assistance Percentage. The enhanced Federal Medical Assistance Percentage with respect to amounts expended for medical assistance for newly eligible Medicaid individuals described in 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) is reduced below one of the following amounts in effect for the period specified:

- A. One hundred percent for calendar quarters in 2014, 2015 and 2016;
- B. Ninety-five percent for calendar quarters in 2017;
- C. Ninety-four percent for calendar quarters in 2018;
- D. Ninety-three percent for calendar quarters in 2019; or
- E. Ninety percent for calendar quarters in 2020;

2. Reduction in enhanced Federal Medical Assistance Percentage effective. The reduction in the enhanced Federal Medical Assistance Percentage described in subsection 1 has taken effect; and

3. Legislative session of at least 30 days. After the reduction of the enhanced Federal Medical Assistance Percentage as described in subsections 1 and 2, the Legislature has convened and conducted a session of at least 30 calendar days.

PART B

Sec. B-1. Obtaining federal approval for enhanced federal match. The Commissioner of Health and Human Services shall take all steps necessary to secure an enhanced Federal Medical Assistance Percentage for services provided to the MaineCare childless adult waiver population in the State equal to that available under the federal Patient Protection and Affordable Care Act for newly eligible Medicaid individuals. If required, by October 1, 2013, the commissioner shall prepare and submit to the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services an analysis of the benefits available under the MaineCare childless adult waiver population as of December 1, 2009. In preparing and submitting this analysis, the commissioner shall compare these services to those of the 3 benchmark plans specified by the federal Department of Health and Human Services, Centers for Medicare and Medicaid Services.

Sec. B-2. Report. The Commissioner of Health and Human Services shall report no later than November 1, 2013 to the Joint Standing Committee on Appropriations and Financial Affairs and the Joint Standing Committee on Health and Human Services on efforts to secure the maximum Federal Medical Assistance Percentage under section 1, including any correspondence with the federal Department of Health and Human Services regarding these efforts.

PART C

Sec. C-1. Evaluation of programs. The Commissioner of Health and Human Services, the Commissioner of Corrections and the Executive Director of the State Board of Corrections shall evaluate the impact of the MaineCare expansion authorized in Part A on programs and services that do not currently receive Federal Medical Assistance Percentage matching funds or do not qualify for enhanced Federal Medical Assistance Percentage matching funds under the federal Patient Protection and Affordable Care Act, with the goal of identifying and maximizing General Fund savings. In evaluating the programs and services under this Part, the commissioners and the executive director shall at a minimum evaluate the impact on the following programs and services: the state-funded Mental Health Services - Community, Office of Substance Abuse and General Assistance - Reimbursement to Cities and Towns programs; services provided for individuals between 21 and 64 years of age who are currently eligible for MaineCare under medically needy, spend-down criteria; services provided under the Maine HIV/AIDS Section 1115 Demonstration Waiver; services provided for parents participating in family reunification activities; services provided for disabled individuals between 21 and 64 years of age with incomes below 139% of the federal poverty level; services provided to individuals awaiting a MaineCare disability determination for whom the applications are subsequently granted; services provided to individuals who would have been considered eligible on the basis of a disability but for whom the full determination process was not completed; and medical services provided to persons in the care and custody of the Department of Corrections or a county correctional facility.

Sec. C-2. Report. The Commissioner of Health and Human Services, the Commissioner of Corrections and the Executive Director of the State Board of Corrections shall report no later than March 1, 2014 to the Joint Standing Committee on Appropriations and Financial Affairs, the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Criminal Justice and Public Safety on the amount of General Fund savings resulting from the MaineCare expansion authorized in Part A and identified in section 1. The report must include the amount of savings realized during fiscal year 2013-14 by service area or program and the amount of savings projected to be achieved during the remainder of that fiscal year and during fiscal year 2014-15 by service area or program.

Sec. C-3. Calculation and transfer. Notwithstanding any other provision of law, the State Budget Officer shall calculate the amount of savings identified in this Part that applies against each General Fund account statewide as a result of the expansion of MaineCare eligibility authorized in Part A and shall transfer the amounts up to the amounts specified in section 4 by financial order upon the approval of the Governor. These transfers are considered adjustments to appropriations in fiscal year 2013-14 and fiscal year 2014-15. The State Controller shall transfer any amounts identified under this Part greater than the amounts specified in section 4 to the MaineCare Stabilization Fund established under the Maine Revised Statutes, Title 22, section 3174-KK. The State Budget Officer shall provide a report of

the transferred amounts to the Joint Standing Committee on Appropriations and Financial Affairs no later than June 30, 2014 for fiscal year 2013-14 and to the joint standing committee of the Legislature having jurisdiction over appropriations and financial affairs no later than June 30, 2015 for fiscal year 2014-15.

Sec. C-4. Appropriations and allocations. The following appropriations and allocations are made.

ADMINISTRATIVE AND FINANCIAL SERVICES, DEPARTMENT OF

Executive Branch Departments and Independent Agencies - Statewide 0017

Initiative: Deappropriates funds on a statewide basis for savings to be identified under this Part in existing state programs that result from the expansion of MaineCare eligibility.

GENERAL FUND	2013-14	2014-15
Unallocated	(\$2,700,000)	(\$5,900,000)
GENERAL FUND TOTAL	(\$2,700,000)	(\$5,900,000)

PART D

Sec. D-1. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)

Bureau of Family Independence - Regional 0453

Initiative: Provides funding for 6 Family Independence Unit Supervisor positions, 13 Office Assistant II positions and 64 Eligibility Specialist positions in the Office for Family Independence program and for related All Other costs necessary to implement and administer the MaineCare eligibility changes. This assumes the Eligibility Specialist positions are funded 25% General Fund and 75% Other Special Revenue Funds and the other positions are funded 50% General Fund and 50% Other Special Revenue Funds.

GENERAL FUND	2013-14	2014-15
POSITIONS - LEGISLATIVE COUNT	83.000	83.000
Personal Services	\$1,842,615	\$1,896,901
All Other	\$167,534	\$167,534
GENERAL FUND TOTAL	\$2,010,149	\$2,064,435

OTHER SPECIAL REVENUE FUNDS	2013-14	2014-15
Personal Services	\$4,185,245	\$4,308,290
All Other	\$322,362	\$326,739

OTHER SPECIAL REVENUE FUNDS TOTAL	\$4,507,607	\$4,635,029
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Medical Care - Payments to Providers 0147

Initiative: Provides funds for the costs of MaineCare coverage for newly eligible adults under 139% of the federal poverty line.

FEDERAL EXPENDITURES FUND	2013-14	2014-15
All Other	\$62,851,289	\$263,724,061
FEDERAL EXPENDITURES FUND TOTAL	\$62,851,289	\$263,724,061

Medical Care - Payments to Providers 0147

Initiative: Provides funds for the costs of MaineCare coverage for the childless adult waiver population.

FEDERAL EXPENDITURES FUND	2013-14	2014-15
All Other	\$29,301,300	\$61,474,140
FEDERAL EXPENDITURES FUND TOTAL	\$29,301,300	\$61,474,140

HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)

DEPARTMENT TOTALS	2013-14	2014-15
GENERAL FUND	\$2,010,149	\$2,064,435
FEDERAL EXPENDITURES FUND	\$92,152,589	\$325,198,201
OTHER SPECIAL REVENUE FUNDS	\$4,507,607	\$4,635,029
DEPARTMENT TOTAL - ALL FUNDS	\$98,670,345	\$331,897,665

SUMMARY

This amendment replaces the bill.

Part A expands medical coverage under the MaineCare program to adults who qualify under federal law with incomes up to 133% of the nonfarm income official poverty line, with the 5% federal income adjustment for family size, and qualifies Maine to receive federal funding for 100% of the cost of coverage for members who enroll under the expansion. Adults who will be eligible are those 21 to 64 years of age beginning January 1, 2014 and adults 19 and 20 years of age beginning October 1, 2019. The

expansion of Medicaid eligibility contained in this Part is repealed if 3 circumstances occur: the enhanced Federal Medical Assistance Percentage for calendar years 2014 through 2020 is reduced below certain stated levels; the reduced enhanced Federal Medical Assistance Percentage has taken effect; and after the occurrence of the reduction of the enhanced Federal Medical Assistance Percentage the Legislature has convened and conducted a session of at least 30 calendar days.

Part B requires the Commissioner of Health and Human Services to take all steps necessary to secure an enhanced federal match rate for services provided to the MaineCare childless adult waiver population and to report to the Joint Standing Committee on Appropriations and Financial Affairs and the Joint Standing Committee on Health and Human Services by November 1, 2013 on these efforts.

Part C requires the Commissioner of Health and Human Services, the Commissioner of Corrections and the Executive Director of the State Board of Corrections to evaluate the impact of the MaineCare expansion on programs and services that do not currently receive Federal Medical Assistance Percentage matching funds or do not qualify for enhanced Federal Medical Assistance Percentage matching funds under the federal Patient Protection and Affordable Care Act, with the goal of identifying and maximizing General Fund savings. Part C requires a report by March 1, 2014 to the Joint Standing Committee on Appropriations and Financial Affairs, the Joint Standing Committee on Health and Human Services and the Joint Standing Committee on Criminal Justice and Public Safety on the amount of General Fund savings resulting from the MaineCare expansion. The report must include the amount of savings realized during fiscal year 2013-14 by service area or program and the amount of savings projected to be achieved during the remainder of that fiscal year and during fiscal year 2014-15. Part C requires the State Budget Officer to calculate the amount of savings that applies against each General Fund account for all departments and agencies from savings associated with the MaineCare expansion and to transfer the amounts by financial order upon the approval of the Governor. It requires the State Controller to transfer any remaining savings to the MaineCare Stabilization Fund. Part C requires the State Budget Officer to provide a report of the transferred amounts to the Joint Standing Committee on Appropriations and Financial Affairs no later than June 30, 2014 and a 2nd report by June 30, 2015.

Part D provides funding for positions in the Department of Health and Human Services, Bureau of Family Independence.

FISCAL NOTE REQUIRED
(See attached)