

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

An Act To Enact the Recommendations of the Study of the Allocations of the Fund for a Healthy Maine

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

PART A

Sec. A-1. 22 MRSA §1511, sub-§13, as enacted by PL 2011, c. 701, §2, is amended to read:

13. Separate accounts. A state agency that receives allocations from the fund and a contractor or vendor that receives funding allocated from the fund shall maintain that money in a separate account and shall report by September 1st of each year to the Commissioner of Administrative and Financial Services providing a description of how those funds for the prior state fiscal year were targeted to the prevention and health-related purposes listed in subsection 6. The Commissioner of Administrative and Financial Services shall by October 1st of each year compile the reports provided under this subsection and forward the information in a report to the Legislature.

Sec. A-2. 22 MRSA §1511, sub-§16 is enacted to read:

16. Annual report by commissioner. Beginning in 2017, the commissioner shall submit a report annually no later than January 1st 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. The report must include the following information from the previous state fiscal year:

- A. Detailed information regarding spending from the fund, including annual expenditures in all programs;
- B. Information on progress the department is making toward health priorities identified by the department as improving the health status of persons in the State using expenditures from the fund;
- C. A description of how funds were targeted to the prevention and health-related purposes listed in subsection 6; and
- D. Information relating to any audit conducted by the department, the Department of Administrative and Financial Services or the Office of the State Auditor of any programs funded by the fund including summary information, the frequency of any audit, the level of detail of any audit and how often corrective action plans were developed and applied.

PART B

Sec. B-1. 22 MRSA §258, sub-§6, as enacted by PL 2001, c. 293, §5, is repealed.

Sec. B-2. 22 MRSA §1655, as amended by PL 1993, c. 685, Pt. B, §3, is repealed.

Sec. B-3. 22 MRSA §2681, sub-§10, as enacted by PL 1999, c. 786, Pt. A, §3, is repealed.

Sec. B-4. 22 MRSA §2687, sub-§2, as enacted by PL 2011, c. 323, §1, is repealed.

Sec. B-5. 22 MRSA §3174-T, sub-§8, as reallocated by RR 1997, c. 2, §46, is amended to read:

8. Annual determination of fiscal status; reports. On a ~~quarterly~~ annual basis, beginning January 1, 2017, the commissioner shall determine the fiscal status of the Cub Care program, determine whether an adjustment in maximum eligibility level is required under subsection 2, paragraph B and report 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 on the following matters:

A. Enrollment approvals, denials, terminations, reenrollments, levels and projections. With regard to denials, the department shall gather data from a statistically significant sample and provide information on the income levels of children who are denied eligibility due to family income level;

B. Cub Care program expenditures, expenditure projections and fiscal status;

C. Proposals for increasing or decreasing enrollment consistent with subsection 2, paragraph B;

D. Proposals for enhancing the Cub Care program;

E. Any information the department has from the Cub Care program or from the Bureau of Insurance or the Department of Labor on employer health coverage and insurance coverage for low-income children;

F. The use of and experience with the purchase option under subsection 2, paragraph D; and

G. Cub Care program administrative costs.

Sec. B-6. 22 MRSA §3194, as enacted by PL 2007, c. 539, Pt. HH, §1 and c. 590, §1, is repealed.

Sec. B-7. PL 1999, c. 16, Pt. P, §1 is repealed.

Sec. B-8. PL 2001, c. 1, Pt. H is repealed.

Sec. B-9. PL 2001, c. 358, Pt. GG, §2 is repealed.

Sec. B-10. PL 2001, c. 358, Pt. LL, §7 is amended to read:

Sec. LL-7. Maine Center for End-of-life Care. The Department of Human Services, Bureau of Health may establish, through contract or otherwise, the Maine Center for End-of-life Care. The purpose of the center is to educate health care providers and the public regarding pain management and palliative and end-of-life care. The center must maintain a registry of health professionals trained in pain management and palliative and end-of-life care. The bureau shall solicit and accept outside funding through grants and other sources to establish and operate the center, which must be hosted by an

educational institution, professional association or other entity interested in the care of the terminally ill. ~~By January 15th each year the bureau shall report to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding the operation of the center and its funding.~~

Sec. B-11. PL 2003, c. 689, Pt. A, §2 is repealed.

Sec. B-12. PL 2009, c. 571, Pt. QQQQ, §1 is repealed.

SUMMARY

This bill enacts recommendations of the study of the allocations of the Fund for a Healthy Maine conducted pursuant to Resolve 2015, chapter 47. The bill requires the Department of Health and Human Services to submit an annual report by January 1st 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 on the Fund for a Healthy Maine. The report must include annual expenditures in all programs, progress made toward improving the health status of persons in the State using the fund, a description of how funds were targeted to prevention and health-related purposes outlined in statute and information on any audits in the previous year. The requirement for the Department of Administrative and Financial Services to provide an annual report regarding the expenditure of the Fund for a Healthy Maine on prevention and health-related purposes is removed from the statute.

The bill also repeals several provisions of law requiring reports by the Department of Health and Human Services that are no longer necessary.