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HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
126TH LEGISLATURE
SECOND REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 1149, L.D. 1578, Bill, “An Act To Increase Health Security by Expanding Federally Funded Health Care for Maine People ”

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

COMMITTEE AMENDMENT

1 (2) A child under 21 years of age;

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

3 H. Beginning July 1, 2014, a person 21 to 64 years of age who is not otherwise
4 eligible for medical assistance under this section, who qualifies for medical assistance
5 pursuant to 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) and whose
6 income is equal to or below 133% of the nonfarm income official poverty line plus
7 5% for the applicable family size as required by federal law. A person eligible for
8 medical assistance under this paragraph must receive the same coverage as is
9 provided to a person eligible under paragraph E; and

10 I. Beginning October 1, 2019, a person 19 or 20 years of age who is not otherwise
11 eligible for medical assistance under this section, who qualifies for medical assistance
12 pursuant to 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) and whose
13 income is equal to or below 133% of the nonfarm income official poverty line plus
14 5% for the applicable family size as required by federal law. A person eligible for
15 medical assistance under this paragraph must receive the same coverage as is
16 provided to a person eligible under paragraph E.

17 **Sec. A-4. Contingent repeal.** The Maine Revised Statutes, Title 22, section
18 3174-G, subsection 1, paragraphs H and I are repealed upon the earlier of the following:

19 1. The meeting of all of the following conditions:

20 A. The enhanced Federal Medical Assistance Percentage with respect to amounts
21 expended for medical assistance for newly eligible Medicaid individuals described in
22 42 United States Code, Section 1396a(a)(10)(A)(i)(VIII) is reduced below 100% for
23 any calendar quarter in 2014, 2015 or 2016;

24 B. The reduction in the enhanced Federal Medical Assistance Percentage described in
25 paragraph A has taken effect; and

26 C. After the reduction of the enhanced Federal Medical Assistance Percentage as
27 described in paragraphs A and B, the Legislature has convened and conducted a
28 session of at least 30 calendar days; and

29 2. December 31, 2016.

30 **PART B**

31 **Sec. B-1. Research organization evaluation.** The Office of Fiscal and
32 Program Review shall contract with a nonpartisan research organization, referred to in
33 this section as "the research organization," to study the impact of the MaineCare
34 expansion authorized in the Maine Revised Statutes, Title 22, section 3174-G, subsection
35 1, paragraphs H and I on programs and services under this Part that do not currently
36 receive Federal Medical Assistance Percentage matching funds or do not qualify for
37 enhanced Federal Medical Assistance Percentage matching funds under the federal
38 Patient Protection and Affordable Care Act, 42 United States Code, Section 18001, et
39 seq., with the goal of identifying and maximizing General Fund savings. The
40 Commissioner of Health and Human Services, the Commissioner of Corrections and the
41 Executive Director of the State Board of Corrections shall provide to the research

1 organization information and assistance requested for preparation of the evaluation. In
2 evaluating the programs and services under this Part, the research organization shall at a
3 minimum evaluate the impact on the following programs and services: the state-funded
4 Mental Health Services - Community, Office of Substance Abuse and General Assistance
5 - Reimbursement to Cities and Towns programs; the elderly low-cost drug program under
6 Title 22, section 254-D; services provided for individuals 21 to 64 years of age who are
7 currently eligible for MaineCare under the medically needy program; services provided
8 under the State's demonstration project waiver under Section 1115 of the United States
9 Social Security Act, 42 United States Code, Section 301, et seq., for individuals with
10 HIV/AIDS; services provided for parents participating in family reunification activities;
11 services provided for disabled individuals 21 to 64 years of age with incomes below
12 139% of the federal poverty level as defined by the federal Department of Health and
13 Human Services and updated annually in the Federal Register under authority of 42
14 United States Code, Section 9902(2); services provided to individuals awaiting a
15 MaineCare disability determination who are subsequently determined disabled; services
16 provided to individuals who would have been considered eligible on the basis of a
17 disability but for whom the full determination process was not completed; and medical
18 services provided to persons in the care and custody of the Department of Corrections or
19 a county correctional facility. The research organization also shall examine the amount
20 of payment for services that hospitals received during fiscal years 2014-15 and 2015-16
21 as a result of the expansion of MaineCare eligibility pursuant to Title 22, section 3174-G,
22 subsection 1, paragraphs H and I. In addition, the research organization shall evaluate
23 any savings and the impact on health outcomes achieved through initiatives implemented
24 pursuant to the state innovation models initiative grant.

25 The research organization shall report twice, no later than February 15, 2015 and
26 February 15, 2016, respectively, to the joint standing committee of the Legislature having
27 jurisdiction over appropriations and financial affairs, the joint standing committee of the
28 Legislature having jurisdiction over health and human services matters and the joint
29 standing committee of the Legislature having jurisdiction over criminal justice and public
30 safety matters on the amount of General Fund savings resulting from the MaineCare
31 expansion authorized in Title 22, section 3174-G, subsection 1, paragraphs H and I and
32 by the research organization pursuant to this section. The reports must include the
33 amount of savings expected and realized during fiscal years 2014-15 and 2015-16 by
34 service area or program, the amount deposited in the MaineCare Stabilization Fund
35 pursuant to section 3 of this Part and the amount of savings projected to be achieved
36 through fiscal year 2020-21 by service area or program.

37 **Sec. B-2. Health insurance marketplace report.** The Office of Fiscal and
38 Program Review shall contract with a nonpartisan research organization to examine the
39 financial feasibility of providing health care coverage to newly eligible MaineCare
40 members through a health insurance marketplace in a manner similar to that of Medicaid
41 expansion coverage in Arkansas or Iowa and the feasibility of establishing a state basic
42 health program similar to Washington's basic health plan. The Office of Fiscal and
43 Program Review shall report by February 15, 2015 to the joint standing committee of the
44 Legislature having jurisdiction over health and human services matters regarding the
45 feasibility of providing health care coverage to newly eligible MaineCare members
46 through a health insurance marketplace in a manner similar to that of Medicaid expansion

1 coverage in Arkansas or Iowa and the feasibility of establishing a state basic health
 2 program similar to Washington's basic health plan.

3 **Sec. B-3. Calculation and transfer.** Notwithstanding any other provision of
 4 law, the State Budget Officer shall calculate the amount of savings identified in this Part
 5 that applies against each General Fund account statewide as a result of the expansion of
 6 MaineCare eligibility authorized in the Maine Revised Statutes, Title 22, section 3174-G,
 7 subsection 1, paragraphs H and I and shall transfer the amounts up to the amounts
 8 specified in section 5 of this Part by financial order upon the approval of the Governor.
 9 These transfers are considered adjustments to appropriations in fiscal year 2014-15. The
 10 State Controller shall transfer any amounts identified under this Part greater than the
 11 amounts specified in section 5 of this Part to the MaineCare Stabilization Fund
 12 established under Title 22, section 3174-KK. The State Budget Officer shall provide a
 13 report of the transferred amounts to the joint standing committee of the Legislature
 14 having jurisdiction over appropriations and financial affairs no later than April 30, 2015
 15 for fiscal year 2014-15 and shall submit adjustments to baseline budget requests totaling
 16 no less than \$11,800,000 per year to reflect the continuation of the identified savings in
 17 the 2016-2017 biennium.

18 **Sec. B-4. Review and responsibility.** Following receipt of the reports from the
 19 research organization as required under section 1 of this Part, the joint standing
 20 committee of the Legislature having jurisdiction over health and human services matters
 21 shall review the information provided in the reports and shall determine if the net cost to
 22 the General Fund of providing coverage under the MaineCare program to individuals
 23 pursuant to the Maine Revised Statutes, Title 22, section 3174-G, subsection 1,
 24 paragraphs H and I exceeds the savings to the General Fund, including any amount
 25 deposited in the MaineCare Stabilization Fund pursuant to section 3 of this Part, due to
 26 the expansion of coverage for those individuals. Following its review of the report
 27 received on February 15, 2016 pursuant to section 2 of this Part the joint standing
 28 committee may report out a bill to the Second Regular Session of the 127th Legislature
 29 regarding determinations and conclusions of the report.

30 **Sec. B-5. Appropriations and allocations.** The following appropriations and
 31 allocations are made.

32 **ADMINISTRATIVE AND FINANCIAL SERVICES, DEPARTMENT OF**
 33 **Executive Branch Departments and Independent Agencies - Statewide 0017**

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

37	GENERAL FUND	2013-14	2014-15
38	Unallocated	\$0	(\$5,900,000)
39			
40	GENERAL FUND TOTAL	\$0	(\$5,900,000)

1	ADMINISTRATIVE AND FINANCIAL		
2	SERVICES, DEPARTMENT OF		
3	DEPARTMENT TOTALS	2013-14	2014-15
4			
5	GENERAL FUND	\$0	(\$5,900,000)
6			
7	DEPARTMENT TOTAL - ALL FUNDS	\$0	(\$5,900,000)

8 **LEGISLATURE**

9 **Legislature 0081**

10 Initiative: Provides one-time funding for the Office of Fiscal and Program Review to
 11 contract with a nonpartisan research organization to evaluate the impact of the expansion
 12 of MaineCare eligibility.

13	GENERAL FUND	2013-14	2014-15
14	All Other	\$0	\$100,000
15			
16	GENERAL FUND TOTAL	\$0	\$100,000

17	LEGISLATURE		
18	DEPARTMENT TOTALS	2013-14	2014-15
19			
20	GENERAL FUND	\$0	\$100,000
21			
22	DEPARTMENT TOTAL - ALL FUNDS	\$0	\$100,000

23	SECTION TOTALS	2013-14	2014-15
24			
25	GENERAL FUND	\$0	(\$5,800,000)
26			
27	SECTION TOTAL - ALL FUNDS	\$0	(\$5,800,000)

28 **PART C**

29 **Sec. C-1. Appropriations and allocations.** The following appropriations and
 30 allocations are made.

31 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)**

32 **Medical Care - Payments to Providers 0147**

1 Initiative: Provides funds for the costs of MaineCare coverage through December 31,
 2 2016, for childless adults at or below 133% of the nonfarm income official poverty line
 3 plus 5% for the applicable family size as required by federal law.

4	FEDERAL EXPENDITURES FUND	2013-14	2014-15
5	All Other	\$0	\$327,657,166
6			
7	FEDERAL EXPENDITURES FUND TOTAL	\$0	\$327,657,166

8 **Office of Family Independence - District 0453**

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

15	GENERAL FUND	2013-14	2014-15
16	POSITIONS - LEGISLATIVE COUNT	0.000	83.000
17	Personal Services	\$0	\$1,909,557
18	All Other	\$0	\$95,105
19			
20	GENERAL FUND TOTAL	\$0	\$2,004,662

21	OTHER SPECIAL REVENUE FUNDS	2013-14	2014-15
22	Personal Services	\$0	\$4,325,301
23	All Other	\$0	\$381,651
24			
25	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	\$4,706,952

26 **Office of MaineCare Services 0129**

27 Initiative: Provides funding for the one-time costs of changes to the Maine Integrated
 28 Health Management Solution and the Automated Client Eligibility System as a result of
 29 expanding MaineCare eligibility.

30	GENERAL FUND	2013-14	2014-15
31	All Other	\$0	\$110,539
32			
33	GENERAL FUND TOTAL	\$0	\$110,539

1	FEDERAL EXPENDITURES FUND	2013-14	2014-15
2	All Other	\$0	\$994,852
3			
4	FEDERAL EXPENDITURES FUND TOTAL	\$0	\$994,852
5	HEALTH AND HUMAN SERVICES,		
6	DEPARTMENT OF (FORMERLY DHS)		
7	DEPARTMENT TOTALS	2013-14	2014-15
8			
9	GENERAL FUND	\$0	\$2,115,201
10	FEDERAL EXPENDITURES FUND	\$0	\$328,652,018
11	OTHER SPECIAL REVENUE FUNDS	\$0	\$4,706,952
12			
13	DEPARTMENT TOTAL - ALL FUNDS	\$0	\$335,474,172

14 **PART D**

15 **Sec. D-1. Written notices required regarding MaineCare coverage.** At the
 16 time of enrolling in the MaineCare program a member who is eligible under the Maine
 17 Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph H or I, the
 18 Department of Health and Human Services shall provide written notice that is readable at
 19 the 6th-grade reading level to the member that the member's MaineCare coverage will
 20 end no later than December 31, 2016 unless a law is passed to extend coverage past that
 21 date.

22 **PART E**

23 **Sec. E-1. Implement reforms in programs for adults with intellectual**
 24 **disabilities.** The Department of Health and Human Services, referred to in this Part as
 25 "the department," shall implement the reforms identified in this section and shall transfer
 26 all savings resulting from those reforms and adjust reimbursement rates for providers of
 27 services as necessary to develop the funds that will reduce waiting lists for services under
 28 the MaineCare Benefits Manual, Chapter 101, Chapter II, Section 21, Home and
 29 Community Benefits for Members with Intellectual Disabilities or Autistic Disorder and
 30 Section 29, Support Services for Adults with Intellectual Disabilities or Autistic Disorder
 31 to less than 6 months by January 15, 2015.

32 1. The department shall implement the following reforms specified in Public Law
 33 2013, chapter 368, Part SS, section 4, including implementing the plan for services called
 34 for by that law:

35 A. Each individual will receive a strength-based standardized assessment of that
 36 individual's strengths or needs to inform a person-centered plan;

37 B. Each individual will be assessed for the natural family and community support
 38 networks potentially available to that individual;

- 1 C. The State will establish a broad menu option model designed to match the amount
- 2 and kind of paid support services needed by each individual;
- 3 D. Each individual will have a designated community resource assistant whose job it
- 4 is to help individuals at any age navigate the local array of services;
- 5 E. The State will develop a thorough and accessible information repository;
- 6 F. The State will establish early support and planning for steps to transition
- 7 individuals from childhood services to adult services;
- 8 G. The State will undertake educational efforts in each neighborhood to educate and
- 9 foster inclusiveness and awareness of the community;
- 10 H. The State's developmental services will deliver only the paid services needed; and
- 11 I. Formal services will be based on individual and realistic needs.

12 2. The department shall carry out the directives and proceed to implement the
13 directives contained in the following laws:

- 14 A. In Resolve 2013, chapter 24, the directive to the department to add home support
- 15 as a covered service permitting a member to live as independently as possible in the
- 16 member's own home;
- 17 B. In Public Law 2013, chapter 368, Part NN, the directive to the department to
- 18 review rate methodology to reduce costs for those with extraordinarily high medical
- 19 needs; and
- 20 C. In Public Law 2013, chapter 368, Part SS, section 1, the directive to the
- 21 department to pursue waivers to use electronic technology to lessen dependence,
- 22 reduce the need for overnight support and eliminate unnecessary staffing costs.

23 3. The department shall consider the following reforms:

- 24 A. Decreasing the cost of health care to persons with intellectual disabilities by
- 25 implementing care management for long-term support service providers;
- 26 B. Increasing the number of occupants from one or 2 to 3 or 4 in small home support
- 27 residential programs in all cases where it can be done without encountering
- 28 behavioral impediments;
- 29 C. Expediting the filling of residential beds by ensuring that vacancies are prioritized
- 30 for individuals needing residential services;
- 31 D. Substituting foster homes for hourly staff care in those situations where
- 32 individuals require long-term or permanent living arrangements for daily support; and
- 33 E. Accelerating the teaching of independent living skills with a focus on populations
- 34 transitioning from school to adult living.

35 **Sec. E-2. Savings from reforms.** The savings generated by reforming the
36 MaineCare services for adults with intellectual disabilities and autism pursuant to section
37 1 of this Part must be used to serve those on the waiting list for services under the
38 MaineCare Benefits Manual, Chapter 101, Chapter II, Section 21, Home and Community
39 Benefits for Members with Intellectual Disabilities or Autistic Disorder and Section 29,
40 Support Services for Adults with Intellectual Disabilities or Autistic Disorder. The

1 department shall develop a plan with clear steps and a timeline to ensure that waiting lists
 2 for services under Sections 21 and 29 do not exceed 6 months by January 15, 2015, and
 3 shall present its plan to the Legislature by October 1, 2014.

4 **Sec. E-3. Emergency rule-making authority.** The department is authorized to
 5 adopt emergency rules under the Maine Revised Statutes, Title 5, sections 8054 and 8073
 6 to implement the provisions of this Part over which the department has subject matter
 7 jurisdiction without having to show that immediate adoption is necessary to avoid a threat
 8 to public health, safety or general welfare.

9 **PART F**

10 **Sec. F-1. Fraud investigation.** The Department of the Attorney General shall
 11 undertake an initiative to strengthen fraud investigation in the MaineCare program. The
 12 Department of the Attorney General shall establish 2 new positions within the Health
 13 Care Crimes Unit to investigate allegations of misuse of public funds in the MaineCare
 14 program and to aid the Attorney General in the prosecution of crimes and other legal
 15 actions related to misuse of public funds.

16 **Sec. F-2. Appropriations and allocations.** The following appropriations and
 17 allocations are made.

18 **ATTORNEY GENERAL, DEPARTMENT OF THE**

19 **Administration - Attorney General 0310**

20 Initiative: Provides funds for 2 Attorney General Detective positions in the Health Care
 21 Crimes Unit.

22 FEDERAL EXPENDITURES FUND	23 2013-14	24 2014-15
25 POSITIONS - LEGISLATIVE COUNT	0.000	2.000
26 Personal Services	\$0	\$176,638
27 All Other	\$0	\$30,380
28 FEDERAL EXPENDITURES FUND TOTAL	\$0	\$207,018

29 **SUMMARY**

30 This amendment, which is the majority report of the committee, replaces the bill.
 31 The amendment contains the following provisions.

32 Part A expands medical coverage under the MaineCare program to adults who
 33 qualify under federal law with incomes up to 133% of the nonfarm income official
 34 poverty line, with the 5% federal income adjustment for family size, and qualifies Maine
 35 to receive federal funding for 100% of the cost of coverage for members who enroll
 36 under the expansion. Adults eligible are those 21 to 64 years of age, effective July 1,
 37 2014, and, if the expansion of MaineCare coverage is not repealed, adults 19 and 20 years
 38 of age, beginning October 1, 2019. The expansion of Medicaid eligibility contained in
 39 this Part is repealed the earlier of either December 31, 2016 or 3 circumstances occurring:

1 the enhanced Federal Medical Assistance Percentage for calendar years 2014 to 2016 is
2 reduced below certain stated levels; the reduced enhanced Federal Medical Assistance
3 Percentage has taken effect; and after the occurrence of the reduction of the enhanced
4 Federal Medical Assistance Percentage the Legislature has convened and conducted a
5 session of at least 30 calendar days.

6 Part B requires the Office of Fiscal and Program Review to contract with a
7 nonpartisan research organization to evaluate the financial feasibility of providing health
8 care coverage to newly eligible MaineCare members through the health insurance
9 marketplace, modeled after Medicaid expansion coverage in Arkansas or Iowa, and the
10 feasibility of establishing a state basic health program similar to Washington's basic
11 health plan and to report the findings of the evaluation to the joint standing committee of
12 the Legislature having jurisdiction over health and human services matters by February
13 15, 2015. It directs the Office of Fiscal and Program Review to contract for an
14 examination of the impact of the MaineCare expansion on programs and services that do
15 not currently receive Federal Medical Assistance Percentage matching funds or do not
16 qualify for enhanced Federal Medical Assistance Percentage matching funds under the
17 federal Patient Protection and Affordable Care Act, 42 United States Code, Section 18001
18 et seq., with the goal of identifying and maximizing General Fund savings. It requires that
19 the research organization report by February 15, 2015 and February 15, 2016 to the joint
20 standing committee of the Legislature having jurisdiction over appropriations and
21 financial affairs, the joint standing committee of the Legislature having jurisdiction over
22 health and human services matters and the joint standing committee of the Legislature
23 having jurisdiction over criminal justice and public safety matters on the amount of
24 General Fund savings resulting from the MaineCare expansion. The reports must include
25 the amount of savings expected and realized during fiscal years 2014-15 and 2015-16 by
26 service area or program. It requires the State Budget Officer to calculate the amount of
27 savings that applies against each General Fund account for all departments and agencies
28 from savings associated with the MaineCare expansion and to transfer the amounts by
29 financial order upon the approval of the Governor. It requires the State Controller to
30 transfer any remaining savings to the MaineCare Stabilization Fund. It requires the State
31 Budget Officer to provide a report of the transferred amounts to the joint standing
32 committee of the Legislature having jurisdiction over appropriations and financial affairs
33 no later than April 30, 2015 for fiscal year 2014-15 and to submit adjustments to baseline
34 budget requests totaling no less than \$11,800,000 per year to reflect the continuation of
35 the identified savings in the 2016-2017 biennium.

36 Part C provides funding for positions in the Department of Health and Human
37 Services, Office of Family Independence - District program.

38 Part D requires the department, when enrolling a MaineCare member who is eligible
39 under the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph H or
40 I, to provide written notice that is readable at the 6th-grade reading level to the member
41 that the member's MaineCare coverage will end no later than December 31, 2016 unless a
42 law is passed to extend coverage past that date.

43 Part E directs the department to implement reforms specified in Public Law 2013,
44 chapter 368, Part SS, section 4, to carry out the directives and implement the initiatives
45 contained in Resolve 2013, chapter 24 and Public Law 2013, chapter 368, Part NN and
46 Part SS, section 1 and to consider 5 reforms. This Part requires that savings resulting

1 from accomplishing the required reforms in programs for adults with intellectual
2 disabilities and autism be used to serve persons on the waiting lists for benefits under the
3 MaineCare Benefits Manual, Chapter 101, Chapter II, Section 21, Home and Community
4 Benefits for Members with Intellectual Disabilities or Autistic Disorder and Section 29,
5 Support Services for Adults with Intellectual Disabilities or Autistic Disorder. This Part
6 directs the department to develop a plan with clear steps and a timeline to ensure that
7 waiting lists for services under Sections 21 and 29 do not exceed 6 months by January 15,
8 2015, and to present the plan to the Legislature by October 1, 2014. This Part authorizes
9 the department to adopt emergency rules to accomplish the duties contained in law.

10 Part F directs the Department of the Attorney General to undertake an initiative to
11 strengthen fraud investigation in the MaineCare program. The Department of the
12 Attorney General is directed to establish 2 new positions within the Health Care Crimes
13 Unit to investigate allegations of misuse of public funds in the MaineCare program and to
14 aid the Attorney General in the prosecution of crimes and other legal actions related to
15 misuse of public funds.

16 **FISCAL NOTE REQUIRED**

17 **(See attached)**