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H.P. 1020

House of Representatives, April 11, 2023

An Act to Promote Quality and Innovation in Nursing and Residential Care Facilities

Submitted by the Department of Health and Human Services pursuant to Joint Rule 204.
Reference to the Committee on Health and Human Services suggested and ordered printed.


ROBERT B. HUNT
Clerk

Presented by Representative MEYER of Eliot.

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

2 **Sec. 1. 22 MRSA §1708, sub-§3, ¶E**, as amended by PL 2013, c. 594, §1, is further
3 amended by amending subparagraph (2) to read:

4 (2) Uses the applicable regional inflation factor as established by a national
5 economic research organization selected by the department to adjust costs other
6 than labor costs or fixed costs; ~~and~~

7 **Sec. 2. 22 MRSA §1708, sub-§3, ¶F**, as amended by PL 2021, c. 29, Pt. R, §1, is
8 further amended by enacting at the end a new last blocked paragraph to read:

9 This paragraph is repealed on June 30, 2024; and

10 **Sec. 3. 22 MRSA §1708, sub-§3, ¶G** is enacted to read:

11 G. For the state fiscal year beginning on July 1, 2024, the department may implement
12 updated rates to take effect on January 1, 2025. The rates may be updated in subsequent
13 years in accordance with principles and processes articulated in section 3173-J,
14 subsection 2. The reimbursement methodology applied in the rates that take effect on
15 January 1, 2025 and in subsequent years must update or replace the use of resource
16 utilization groups with an appropriate method that promotes efficiency and reimburses
17 nursing facilities adequately. The methodology may eliminate cost settlement and
18 other practices that are administratively burdensome for nursing facilities and the
19 department. The methodology may incorporate alternative payment models as defined
20 in section 3173-J, subsection 1, paragraph A.

21 **Sec. 4. Nursing and residential care facility innovation and quality**
22 **initiatives.** The Department of Health and Human Services may establish innovation and
23 quality initiatives to advance a continuum of person-centered nursing and residential care
24 facility services that promote access, health, quality of life, autonomy and safety. The
25 department may establish participation criteria for the initiatives that complement federal
26 regulations and may seek waivers and Medicaid state plan amendments as needed from the
27 federal Department of Health and Human Services, Centers for Medicare and Medicaid
28 Services to implement the initiatives. Participation criteria may include geographic
29 location, past performance of applicants and commitment to program features identified by
30 the state Department of Health and Human Services with input from stakeholders, which
31 may include but are not limited to the following:

32 1. Enhanced care coordination and person-centered care planning that identifies the
33 preferences of residents and their families or surrogate decision makers using structured,
34 shared decision-making approaches to address health, safety, social needs, self-esteem and
35 achievement of full potential;

36 2. Accessible written policies and procedures in plain language and detailed workflow
37 plans that ensure resident safety standards to prevent infection, minimize medication errors,
38 support appropriate use of antipsychotic medications, reduce risk of falls and recognize
39 early the signs of exploitation and abuse;

40 3. Physical environments that promote resident safety, privacy, autonomy and quality
41 of life;

42 4. Recruitment and retention of a well-trained, well-supported workforce;

