

129th MAINE LEGISLATURE

FIRST REGULAR SESSION-2019

Legislative Document	No. 1052

S.P. 312

In Senate, February 28, 2019

An Act To Require Regular and Transparent Review of MaineCare Reimbursement Rates

Reference to the Committee on Health and Human Services suggested and ordered printed.

h GT

DAREK M. GRANT Secretary of the Senate

Presented by Senator SANBORN, H. of Cumberland. Cosponsored by Representative FARNSWORTH of Portland and Senators: CLAXTON of Androscoggin, MOORE of Washington, TIMBERLAKE of Androscoggin, Representatives: BICKFORD of Auburn, CRAVEN of Lewiston, GATTINE of Westbrook, GRIFFIN of Levant, MADIGAN of Waterville.

1	Be it enacted by the	People of the State of	Maine as follows:	
2	Sec. 1. 5 MRS	A §12004-I, sub-§36	-F is enacted to read:	
3	<u>36-F.</u>			
4 5	Human Services	<u>MaineCare</u> <u>Reimbursement</u>	Expenses Only	<u>22 MRSA §3122</u>
6 7		<u>Rates Review</u> <u>Advisory Committee</u>		
8	Sec. 2. 22 MR	SA c. 852 is enacted to	o read:	
9		<u>CHAP</u>	<u>TER 852</u>	
10	MAI	NECARE REIMBUR	SEMENT RATES R	REVIEW
11	§3121. Review of M	laineCare reimbursen	nent rates	
12 13 14	schedule for ongoin reimbursement rate	g review of reimburs is reviewed at least ev	ement rates under N very 3 years. The re	partment shall establish a MaineCare so that each eview schedule must be
15 16 17 18	health and human ser	rvices matters and appr sponse to recommendation	opriations and financi	having jurisdiction over ial affairs. The schedule y committee established
19 20 21		by MaineCare, exc		under subsection 1 each exclude services with
22 23	A. Reviewed or or federal rule or		asis according to a pro	ocess established in state
24	B. Based on cos	<u>t;</u>		
25	C. Contracted th	rough a managed care	or capitated rate; or	
26	D. Based on reg	ularly updated Medicar	re rates.	
27 28		submitted to the joint those rates not subject		pursuant to subsection 1
29 30	<u>3. Review. Ea</u> subsection 2 must inc		e undertaken by the	department pursuant to
31	<u>A.</u> An analysis c	of the access, service, q	uality and utilization of	of the service;
32 33		son of rates with oth nce or private pay rates		sement rates, including
34	C. Provider reter	ntion of employees;		

- 1 D. Acceptable industry productivity standards;
- 2 <u>E. Participation and survey of current provider costs;</u>
- 3 <u>F. Consideration of service access and cost in rural areas;</u>
- 4 <u>G. Consideration of needs and costs for specific population groups; and</u>
- 5 <u>H. Input from the advisory committee.</u>
- The department shall work with the advisory committee and the providers of the service
 being reviewed to determine responses and strategies to the review findings.

4. Annual report. The department shall provide an annual report, no later than 8 9 December 1st of each year, beginning in 2020, that includes the results of the review of each service reviewed pursuant to subsection 2 in the most recent year, including the 10 analysis under subsection 3 and any actions taken in response to the review, and any 11 12 changes to rates reviewed by the department pursuant to this chapter, to the joint standing 13 committees of the Legislature having jurisdiction over health and human services matters and appropriations and financial affairs. The department shall also submit the report to 14 the Governor together with recommendations for rate increases for consideration for 15 inclusion in the biennial budget. 16

17 §3122. Advisory committee

- 18The MaineCare Reimbursement Rates Review Advisory Committee, referred to in19this chapter as "the advisory committee," is established as provided in Title 5, section2012004-I, subsection 36-F to make recommendations to the department regarding review21of MaineCare reimbursement rates pursuant to section 3121.
- 1. Membership. The advisory committee has the following 21 voting members and
 one ex officio, nonvoting member:
- 24 <u>A. Six members appointed by the President of the Senate:</u>
- 25 (1) A representative of providers of community behavioral health services
 26 recommended by a statewide association of providers of behavioral health care
 27 services;
- 28 (2) A representative of hospitals providing services to MaineCare members
 29 recommended by a statewide association representing hospitals;
- 30(3) A representative of providers of nonemergency medical transportation31services to MaineCare members;
- 32 (4) A representative of a rural health clinic;
- 33(5) A representative of home health care providers recommended by a statewide34association representing home health care providers; and
- 35(6) A representative of providers of durable medical equipment recommended by36a statewide association of durable medical equipment providers;
- B. Six members appointed by the leader of the largest minority party in the Senate:

1 2	(1) A representative of primary care physicians serving MaineCare members recommended by a statewide association representing physicians;
3 4	(2) A representative of dentists serving MaineCare members recommended by a statewide association representing dentists;
5 6	(3) A representative of federally qualified health centers recommended by a statewide association of federally qualified health centers;
7	(4) A representative of nonmedical home and community-based services;
8 9 10	(5) A representative of providers serving MaineCare members with intellectual disabilities or autism recommended by a statewide association of providers of services to individuals with intellectual disabilities or autism; and
11 12 13	(6) A MaineCare member living with a chronic behavioral health condition or a family member or guardian of a MaineCare member living with a chronic behavioral health condition;
14	C. Five members appointed by the Speaker of the House of Representatives:
15 16	(1) A representative of providers of substance use disorder services recommended by a statewide association representing behavioral health services;
17 18	(2) A representative of psychiatric physicians recommended by a statewide association representing psychiatric physicians;
19	(3) A representative of ambulatory surgical centers;
20 21	(4) A representative of hospice providers recommended by the Maine Hospice Council established in section 8611; and
22 23	(5) A representative of long-term care facilities recommended by a statewide association representing nursing facilities or assisted living facilities;
24 25	D. Four members appointed by the leader of the largest minority party in the House of Representatives:
26	(1) A family member of a child with disabilities receiving MaineCare services;
27 28	(2) A representative of pharmacists serving MaineCare members recommended by a statewide association representing pharmacists;
29 30	(3) A representative of nurses recommended by a statewide association representing nurses; and
31 32 33	(4) A representative of physical therapists or occupational therapists recommended by a statewide association representing physical therapists or occupational therapists; and
34 35	E. The commissioner or the commissioner's designee, who is an ex officio, nonvoting member of the advisory committee and shall attend meetings.
36 37 38	2. Terms of office. Each appointed member of the advisory committee serves a 4- year term and may be reappointed. A member is no longer qualified to serve if that member no longer meets the qualifications of appointment.

1 2 3 4 5	3. Meetings; chair. The advisory committee must meet at least once every calendar quarter and may meet more often and as necessary to fulfill its statutory duties. Members shall elect a chair and vice-chair from among its members annually. Chairs and vice-chairs may be reelected. Meetings are public proceedings in accordance with Title 1, chapter 13.
6	4. Duties. The advisory committee has the following duties:
7 8 9	A. Review the 3-year schedule developed by the department and recommend, by majority vote of the advisory committee, any changes to the review schedule under section 3121, subsection 1;
10	B. Provide advice and input to the department concerning reviews of rates;
11 12 13	C. Hold public hearings, as considered necessary, to receive public testimony from providers of MaineCare services and other interested parties, including members of the public; and
14 15 16 17 18	D. Review the department's reports and schedules and submit an annual report no later than December 1st of each year beginning in 2020 describing the advisory committee's activities, with recommendations to the joint standing committees of the Legislature having jurisdiction over health and human services matters and appropriations and financial affairs.
19 20 21	5. Staffing. The department shall provide staffing to the advisory committee including administrative services, report writing, publishing and organizing meetings and arranging meeting locations.
22 23 24 25 26 27 28	Sec. 3. Staggered terms; appointments. Notwithstanding the Maine Revised Statutes, Title 22, section 3114, subsection 2, the appointing authorities for the original appointments of members to the MaineCare Reimbursement Rates Review Advisory Committee shall each designate their first 2 appointments to 2-year terms, their 2nd 2 appointments to 3-year terms and any other appointments to 4-year terms. The appointing authorities shall make appointments no later than 60 days after the effective date of this Act.

29

SUMMARY

This bill establishes a regular review process for MaineCare reimbursement rates. 30 The Department of Health and Human Services shall review all rates over a 3-year period 31 32 except those that are already subject to regular review, based on cost, reimbursed at a capitated rate, or tied to Medicare or some other rates. The 3-year schedule and the 33 reviews are required to be submitted to the joint standing committees of the Legislature 34 having jurisdiction over health and human services matters and appropriations and 35 The results of reviews are also submitted to the Governor for financial affairs. 36 37 consideration for inclusion in the biennial budget. The bill also establishes the MaineCare Reimbursement Rates Review Advisory Committee made up of stakeholders 38 appointed by the Presiding Officers and the minority leaders in the Legislature to provide 39 advice and input to the department on rate reviews. The advisory committee also submits 40 an annual review of its activities to the joint standing committees of the Legislature 41

- having jurisdiction over health and human services matters and appropriations and financial affairs. The advisory committee is staffed by the Department of Health and 1
- 2
- Human Services. 3