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April 20, 2023

Senator Joseph Baldacci, Chair
Representative Michele Meyer, Chair
Members, Joint Standing Committee on Health and Human Services
100 State House Station
Augusta, ME 04333-0100

Re: LD 1522, *An Act to Provide Economic Justice to Historically Disadvantaged Older Citizens by Amending the Laws Governing the Medicare Savings Program*

Senator Baldacci, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

Thank you for the opportunity to provide input on LD 1522, *An Act to Provide Economic Justice to Historically Disadvantaged Older Citizens by Amending the Laws Governing the Medicare Savings Program*. DHHS has concerns with portions of the bill.

We understand the sponsor is seeking to remove the portion of the bill that would eliminate the Specified Low-Income Medicare Beneficiary (SLMB) tier of Medicare Savings Programs (MSPs). We appreciate this as SLMB is a compulsory health care option under § 1902a (10)(E)(iii) of the Social Security Act.[1] Given the federal requirement, elimination would not be allowable.

LD 1522 additionally proposes the use of the Elder Economic Security Standard Index (the Elder Index) as a means of income assessment for MSPs. This content is not generated by the U.S. Department of Health and Human Services or other executive authority, nor is it acknowledged under governing legislation or rule. Introducing an external metric into already defined procedures is problematic. Maine's existing approach conforms to regulatory requirements, and we are concerned that use of a metric such as the Elder Index would jeopardize compliance. Each MSP is significantly dependent on established Federal Poverty Level (FPL) and SSI-guidelines, and Maine should continue to align its practices with these elements.

MSP qualifications are addressed under 10-144 C.M.R ch. 332, pt. 8, and the bill amends current criteria. Any related updates would need to be accepted by the Centers for Medicare and Medicaid Services (CMS). The Department would also need to educate both internal and public stakeholders about developments, and it would have to refine its technology to account for new data receipt and processing, as well as train Department staff.

Removal of the asset limit for this program would require submission of a state plan amendment to CMS.

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[1] *See* 42 U.S.C. § 1396a(10)(E)(iii); *see also* 42 C.F.R. § 435.124 and 42 C.F.R. § 435.10.

Thank you again for the opportunity to provide input. If you have questions or need additional information, we will be glad to provide that for the work session.

Sincerely,

Anthony Pelotte
Director
Office for Family Independence