F	ProgramCdProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit Line	# HHS Action	HHS Vote	AFA Action	AFA Vote	FY 10 Total	FY 11	Total
3	121 Mental Health Services - Community	CP2	Provides funding for services for approximately 75 people on the Bridging Rental Assistance Program waitlist and to expand access to community integration services to approximately 80 people.		Added in CP2.	Adult MH	General Fund	1	IN	Y	UNK		S	50	\$650,000
6	732 Mental Health Services - Community Medicaid	CP2-MH- CS	Reduces funding for the MaineCare Benefits Manual, Section 17, Community Support Services by lowering reimbursement rates by 4%. The corresponding federal funding reduction is in the Medical Care - Payments to Providers program.		Added in CP2.	Adult MH	General Fund	14	OUT	N, 10-1	UNK		\$	60	(\$675,344)
12	121 Mental Health Services - Community		and \$300,000 for community intervention services.	coverage for MaineCare-like services to people who are not eligible for MaineCare. The impact will be: 40 people will no longer receive ACT services, 13 people will no longer receive living supports, 364 people will no longer receive community integration and various contracts with advocacy and support organizations will be ended.	(\$1,341,864) in FY 10 and (\$4.579.469) in FY 11. Policy Committee adopted (\$1,024,114) in FY 10 and (\$1,352,384) in FY 11. See		General Fund	2 1	50 AMD	N, 10-1	UNK		(\$1,341,86		\$2,164,469)
17	732 Mental Health- Services - Community- Medicaid	F A 7272 CP2 CP1	Reduces funding based on a 10% reduction to the rates- paid to providers under all sections of MaineCare policy except Section 21 residential services which are reduced 4% and hospital, physician, pharmacy and dental services.	Analysis of paid claims for services in fiscal	Deleted in CP2.	Adult MH	General- Fund	14 1	92 OUT	Y	UNK		9	sol (	\$4,525,641)
18	732 Mental Health Services - Community Medicaid		Reduces funding for the MaineCare Benefits Manual, Section 65, Behavioral Health Services by 10%, excluding children's comprehensive community support and multi-systems therapy which will be reduced by 4% and outpatient therapy and children's assertive community treatment services crisis services and medication management which will not be reduced. Reimbursement rates for crisis services will be standardized to achieve the equivalent of 10% savings. The corresponding federal funding decreases are in the Medical Care - Payment to Providers program.		Added in CP2 - subsequently corrected to add additional - \$62,046 from OSA. See Children's Services for remaining items of this initiative. Original 10% amount was (\$4,525,641). CP2 Amount was (\$937,965). CP3 partially restores.	Adult MH	General Fund	14	OUT	N, 9-2	UNK		S	60	(\$494,454)
24	147 Medical Care - Payments to Providers	CP2-CS- PNMI	Reduces funding by lowering reimbursement rates under the MaineCare Benefits Manual Section 97, Appendix D - Principles of Reimbursement for Child Care Facilities by 3% for treatment foster care and 2% for other facilities. The reductions to treatment foster care rates are not to be passed on as reductions to the foster parents.		CP2 Added.	Children's Services	General Fund	1	IN	Y	UNK		S	60	(\$622,049)

F	rogramCdProgram Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary	Fund	Unit Lin	e# HHS	HHS Vot	e AFA	AFA Vote	FY 10 Total FY	11 Total
					Class			Action	3/4	Action			
34	136 Mental Health Services - Children F-A-7224 CP2	Reduces funding for non-MaineCare children's crisis services.	This budget initiative will be undertaken in collaboration with the Office of Adult Mental Health Services in order to achieve the best efficiencies. Reductions are proposed for fiscal year 2009-10 by taking an across-the-board cut across the 6 community agencies that currently provide children's mobile crisis services. Funding reductions in fiscal year 2010-11 will be achieved by creating a statewide administrative structure.	curtailment order dated November 20, 2009. CP2 deleted the FY 11 reduction. Original proposal included a	Services	General Fund	7	165 IN	Y	UNK		(\$310,000)	\$0
39		Reduces funding based on a reduction to the rates paid to providers under the following MaineCare Benefits Manual sections: 3, Ambulatory Care Clinic Services; 15, Chiropractic Services; 23, Developmental and Behavioral Evaluation Clinics; 28, Rehabilitative and Community Support Services for Children with Cognitive Impairments and Functional Limitations; 30, Family Planning Agency Services; 35, Hearing Aids an Services; 37, Children's Home Based Mental Health; 46, Psychiatric Hospital Services; 62, Genetic Testing and Clinical Genetic Services; 68, Occupational Therapy Services; 85, Physical Therapy Services; 95, Podiatric Services; 113, Transportation Services; 150, STD Screening Clinic Services; and 190, Boarding Home and Related.		Added in CP2. Original 10% reduction was \$1,544,951. CP3 modifies blippie but not funding reduction in this program.	Children's Services	General Fund	17	OUT	N, 10-1	UNK		\$0	(\$553,367)
40	Services - Child CP2 CP3 Medicaid	Reduces funding for the MaineCare Benefits Manual, Section 65, Behavioral Health Services by 10%, excluding children's comprehensive community suppor and multi-systems therapy which will be reduced by 4% and outpatient therapy and children's assertive community treatment services crisis services and medication management which will not be reduced. Reimbursement rates for crisis services will be standardized to achieve the equivalent of 10% savings. The corresponding federal funding decreases are in the Medical Care - Payment to Providers program.		Added in CP2. See Community Services for remaining items of this initiative. Original 10% reduction was (\$1,544,951). CP2 Amount was (\$602,578). CP3 partially restores.	Children's Services	General Fund	17	OUT	N, 10-1			\$0	(\$317,653)
47A	19 Department CP3 wide	Reduces funding to reflect DHHS Personal Services savings		CP 3 Added	Department wide	General Fund	1	137 UNK		UNK	0	(\$3,000,000)	\$0
51	987 Mental CP2-21-A Retardation Waiver - MaineCare	Provides funding to increase enrollment in the MaineCare Benefits Manual, Section 21, Home and Community Benefits for Members with Mental Retardation or Autistic Disorder by approximately 100 members and in the MaineCare Benefits Manual, Section 29, Community Support Benefits for Members with Mental Retardation and Autistic Disorder by approximately 60 members. The corresponding federal funding increase is in the Medical Care - Payments to Providers program.		Added in CP2.	Developmental Services		16	IN	Y	UNK		\$0	\$1,571,889

	ProgramCo	Program	Initiative # InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit	Line #	HHS Action	HHS Vote	AFA Action	AFA Vote FY 10 Total	FY 11 Total
52		Mental Retardation Waiver - Supports	CP2-21-A Provides funding to increase enrollment in the MaineCare Benefits Manual, Section 21, Home and Community Benefits for Members with Mental Retardation or Autistic Disorder by approximately 100 members and in the MaineCare Benefits Manual, Section 29, Community Support Benefits for Members with Mental Retardation and Autistic Disorder by approximately 60 members. The corresponding federal funding increase is in the Medical Care - Payments to Providers program.		Added in CP2.	Developmen tal Services		16		IN	Y	UNK	\$C	\$255,714
56		Mental Retardation Waiver - MaineCare	CP2-21-B Reduces funding for the MaineCare Benefits Manual, Section 21, Home and Community Benefits for Members with Mental Retardation or Autistic Disorder Reimbursement rates will be reduced by 2% for day habilitation and work supports and 1% for residential providers; all other services will be reduced by 10%. The corresponding federal funding reduction is in the Medical Care - Payments to Providers program.		Added in CP2.	Developmental Services	Fund	16		OUT	N, 8-3	UNK	SC	
57		Mental Retardation Services - Community	F-A-7202 Reduces funding by decreasing room and board subsidies.	Developmental Services provides rent subsid- to offset the room and board costs that are not sufficiently covered by the individuals' SSI or other benefits for group homes. The department proposes curtailing current contracts and reducing fiscal year 2010-11 contracts.	FY 10 deappropriation equals amount contained in the curtailment order dated November 20, 2009. CP2 reduced the FY 11 deappropriation. Original amount was (\$1,022,207).	Developmental Services		60	157	OUT	N, 10-1	UNK	(\$808,256)	(\$349,357)
76		Medicaid- Services — Mental- Retardation	F-A-7272 CPI-CP2 Reduces funding based on a 10% reduction to the rates paid to providers under all sections of MaincCare polic except Section 21 residential services which are reduced 4% and hospital, physician, pharmacy and dental services:		Deleted in CP2.	Developmental Services		12	177	OUT	Y	UNK	- \$6	( <del>\$399,793)</del>
78		Mental- Retardation- Waiver — MaineCare	F.A.7272 CP1 CP2 Reduces funding based on a 10% reduction to the rates paid to providers under all sections of MaineCare polic except. Section 21 residential services which are reduced 4% and hospital, physician, pharmacy and dental services.		Deleted in CP2.	Developmen tal Services		16	214	OUT	Y	UNK	- \$6	(\$4,744,375)
231		Long Term Care - Human Services	CP2 Provides funding for home-based services in the Office of Elder Services.		CP Added	Elder Services	General Fund	1		IN	Y	UNK	\$0	\$1,000,000

	ProgramCoProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary	Fund	Unit Line #	HHS	HHS Vote	AFA	AFA Vote	FY 10 Total	FY 11 Total	
						Class			Action	3/4	Action				
232	148 Nursing Facilities	CP2 CP3	Reduces funding by eliminating staff enhancement payments to nursing facilities.		CP2 Added. Estimated genera fund impact modified 3/14/10		General Fund	1	AMD	3/11 11-0 elim SH but inc NF reimb.			\$	0 (\$2,310	0,712)
232A	148 Nursing Facilities	CP2 CP3	Provides funding for modifications to payments to nursing facilities.		CP3 Added. Estimated genera fund impact modified 3/14/10		General Fund	1	AMD	3/11 11-0 elim SH but inc NF reimb.			\$	0 \$2,27	70,224
236	147 Medical Care - Payments to Providers	CP2-ES- PNMI CP3	Adjusts funding by allowing the program allowance to be part of personal care services when developing rates for MaineCare Benefits Manual Section 97, Appendix C, Medical Care and Remedial Care Facilities.		CP2 added. CP3 Modified?	Elder Services	General Fund	1	IN	Y	UNK		\$1,248,57	5 \$1,24	48,575
239	Z009 MR/Elderly PNMI Room and Board	CP2-ES- PNMI CP3	Adjusts funding by allowing the program allowance to be part of personal care services when developing rates for MaineCare Benefits Manual Section 97, Appendix C, Medical Care and Remedial Care Facilities.		CP 2 Added equal to - \$2,252,111 per year. CP3 modified.	Elder Services	General Fund	1	UNK		UNK		(\$4,314,296	5) (\$4,314	4,296)
240	147 Medical Care - Payments to Providers	CP2-ES- PNMI2	Provides funding for MaineCare Benefits Manual Section 97, Appendix C, Medical Care and Remedial Care Facilities to reverse an initiative that was included in Public Law 2009, chapter 213.		CP2 added.	Elder Services	General Fund	1	IN	Y	UNK		\$	0 \$2,29	92,299
246	420 Long Term Care - Human Services	F-A-7210	Reduces funding for non-MaineCare adult day services and other supportive and administrative services.	This initiative reduces funding for adult day services by reducing hours of support; reduces a contract for case aides by \$103,000 and reduces contracts for occupational therapy consultation.		Elder Services	General Fund	1 86	OUT		UNK		\$	0 (\$225	25,000)
247	140 Office of Elder Services Central Office		Reduces funding for non-MaineCare adult day services and other supportive and administrative services and allowing for \$500,000 in fiscal year 2010-11 for day services and consultations for adult protective services clients.	This initiative reduces funding for adult day services by reducing hours of support; reduces a contract for case aides by \$103,000 and reduces contracts for occupational therapy consultation.	CP revises language and reduces net savings in FY 11 from originally proposed - \$775,000.	Elder Services	General Fund	1 59	8 OUT	N, 10-1	UNK		(\$250,000	(\$275	75,000)
252	148 Nursing Facilities	F-A-7272 CP2	Reduces funding based on a 10% reduction to the rates paid to providers under all sections of MaineCare polic except Section 21 residential services which are reduced by 4% and hospital, physician, pharmacy and dental services.		CP2 Deleted. CP1 changed blippie. HHS voted out prior- to CP1. HHS Committee did- support a new initiative to reduce loe assessment costs by \$500,000.	Elder- Services	General Fund	± 86	7 OUT	Y	UNK		4	0 (\$6,647	7,068)

	ProgramCc Program	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit Line #	HHS Action	HHS Vote	AFA Action	AFA Vote FY 10 Tot	ıl FY	11 Total
251	Z009 MR/Elderly PNMI Room and Board	F-A-7272 CP2 CP3	Reduces funding based on a reduction to the rates paid to providers under the following MaineCare Benefits Manual sections: 3, Ambulatory Care Clinic Services; 15, Chiropractic Services; 23, Developmental and Behavioral Evaluation Clinics; 28, Rehabilitative and Community Support Services for Children with Cognitive Impairments and Functional Limitations; 30, Family Planning Agency Services; 35, Hearing Aids an Services; 37, Children's Home Based Mental Health; 46, Psychiatric Hospital Services; 62, Genetic Testing and Clinical Genetic Services; 68, Occupational Therapy Services; 85, Physical Therapy Services; 95, Podiatric Services; 113, Transportation Services; 150, STD Screening Clinic Services; and 190, Boarding Home and Related.		CP2 Added. CP3 modifies blippie but not funding reduction in this program.	Elder Services	General Fund	1	OUT	N, 10-1	UNK		\$0	(\$225,909)
256	Healthy Maine		Reduces funding to reflect a fund wide reduction to the Fund for a Healthy Maine in fiscal year 2010-11		See Part TTT Language	FHM	Fund for a Healthy Maine	1	OUT	N, 9-1	UNK		\$0	(\$1,330,582)
258	957 FHM - Service Center	F-A-1595	Transfers 4 Community Care Worker positions and one Social Services Program Specialist II position from the FHM - Service Center program to the Division of Licensing and Regulatory Services program.			FHM	Fund for a Healthy Maine	1 90	2 IN		UNK		\$0	(\$412,346)
259	Healthy Maine		Law 2009, chapter 213, Part UUUU, section 2. A pro rata adjustment to the individual Fund for a Healthy Maine accounts is not required since the balance in the fund on June 30, 2009 was sufficient to cover the deallocation.	Public Law 2009 c. 213, Part UUUU, section 2 deallocated (\$536,000) from the Fund for a Healthy Maine account in the Department of Administrative and Financial Services to cover a projected revenue shortfall in the Fund. The State Budget Officer was charged with pro-rating the deallocation to the individual subsidiary FHM accounts by Financial Order in fiscal year 2009-10. This pro-rata adjustment is not required because there was sufficient cash on hand at June 30, 2009 to cover the deallocation. This initiative provides an allocation of \$536,000 to offset the deallocation in fiscal year 2009-10.		FHM	Fund for a Healthy Maine		4 IN		UNK		336,000	\$0
260	964 FHM - Fire Marshal	F-A-7221	Provides funding for inspections of facilities licensed by the Department of Health and Human Services.	These funds will be used to pay for an accrued balance and for the anticipated increase in fiscal year 2009-10 and fiscal year 2010-11 only for mandatory inspections of Department of Health and Human Services licensed facilities that provide services to children.	HHS Committee OK'd in 2-3- 10 report Back	FHM	Fund for a Healthy Maine	1 120	9 IN		UNK	\$1,	40,780	\$0

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P	rogramCcProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit Line	# HHS Action	HHS Vote 3/4	AFA Action	AFA Vote	FY 10 Total F	Y 11 Total
261	921 Fund for a Healthy Maine		Transfers Fund for a Healthy Maine balance to General Fund unappropriated surplus in fiscal years 2009-10 and 2010-11.		With enactment of PL 462 (streamlining), not sufficient funds available to make transfer as proposed. HHS vote: 10 support assuming transfer amount reduced for sufficient funds; 2 as proposed 2 opposed transfer. Proposed as FY 10 -\$3,925,515; FY 11 - \$222,282		Fund for a Healthy Maine	1	AMD	10-2-2	UNK		\$2,816,000	\$0
262	921 Fund for a Healthy Maine		Transfers Fund for a Healthy Maine balance to General Fund unappropriated surplus in fiscal years 2009-10 and 2010-11.		With enactment of PL 462 (streamlining), not sufficient funds available to make transfer as proposed. HHS- vote: 10 support assuming- transfer amount reduced for sufficient funds; 2 as proposed 2 opposed transfer. Proposed as FY 10 \$3,925,515; FY 11 \$222,282	FHM	Fund for a Healthy Maine	1	AMD	10-2-2	UNK	-	\$3,925,515	\$222,282
263	523 Disability Rights Center	F-A-7004	Reduces funding to maintain appropriations within available resources.	This initiative represents a one-time reduction of 5% to the program to maintain costs within available resources.		HHS Other	General Fund	1 3	33 OUT	8-5	UNK		\$0	(\$6,538)
266	129 Bureau of Medical Services	CP2	Provides funding to begin the necessary planning for managed care.		CP2 Added One-time?	MaineCare Admin	General Fund	1	IN	Y, 9-2	UNK		\$0	\$1,000,000
268	129 Bureau of Medical Services	F-A-1918	Adjusts funding for the decrease in the federal financial participation rate from 75% to 50% on the Maine Integrated Health Management Solution (MIHMS) system until fiscal year 2011-12 when the certification process will be completed.	This initiative recognizes that the certification process for the Maine Integrated Health Management Solution (MIHMS) system will not be completed until 2012. Until the certification process is complete, the federal government will not participate at 75%. After the certification process has been completed by the Centers for Medicare and Medicaid Services, the department will be retroactively reimbursed for the difference in federal participation rates. It is anticipated that the retroactive reimbursement will occur in fiscal year 2011-12.	timing - retro and forward.	MaineCare Admin	General Fund	1 5	30 IN		TBL	3/1/10	\$0	\$3,884,463
288A	948 FHM - Substance Abuse	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	Fund for a Healthy Maine	1 2	07 UNK		UNK		\$0	(\$181,408)
288A		CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	Fund for a Healthy Maine	1 9	03 UNK		UNK		\$0	(\$1,097,080)
288A	137 IV-E Foster Care/Adoption Assistance	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1 7	92 UNK		UNK		\$0	(\$151,783)
288A	705 Medicaid Services - Mental Retardation	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1 1	80 UNK		UNK		\$0	(\$4,538,598)
288A	147 Medical Care - Payments to Providers	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1 7	92 UNK		UNK		\$0	(\$44,765,452)

Pro	ogramCdProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit L	ine # HHS Action	HHS Vote AFA 3/4 Action	AFA Vote FY 10 Total	FY 11 Total
288A	731 Mental Health Services - Child Medicaid		Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	185 UNK	UNK	\$0	(\$3,031,491)
288A	732 Mental Health Services - Community Medicaid	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	792 UNK	UNK	\$0	(\$5,633,364)
288A	987 Mental Retardation Waiver - MaineCare	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	215 UNK	UNK	\$0	(\$11,383,528)
288A		CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	219 UNK	UNK	\$0	(\$923,182)
288A	148 Nursing	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	792 UNK	UNK	\$0	(\$14,179,840)
288A		CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	202 UNK	UNK	\$0	(\$424,509)
288A	Z042 Traumatic Brain Injury Seed	CP3 FMAP	Reduces funding as a result of the extension of the enhanced ARRA FMAP rate through June 30, 2010.		Added in CP3	MaineCare FMAP	General Fund	1	792 UNK	UNK	\$0	(\$18,708)
293	147 Medical Care - Payments to Providers	F-A-7213 CP3	Reduces funding by changing the reimbursement to critical access hospitals for inpatient and outpatient services from 109% of the MaineCare allowable cost to 101% 107% of the MaineCare allowable cost.	There are 15 critical access hospitals in the State. Currently, MaineCare reimburses of these hospitals at a rate above their costs based on statute. This initiative would reduce MaineCare's reimbursement from 109% to 101% of cost.	HHS report: Voted 7-2 to support some savings and endorse continued discussions a mong all interested parties. Original GF amounts were - \$403,678 in FY 10 and - \$1,614,712 in FY 11.See V V language. HHS voted 3/11 to reduce from 109% to 107%. CP3 modifies to 107%.	Hospitals	General Fund	1	729 AMD	3/11 vote UNK in as AMD	(\$103,478)	(\$414,712)
296	147 Medical Care - Payments to Providers	F-A-7214	Reduces funding by reimbursing outpatient hospital services based on ambulatory patient classifications at 86% of Medicare rates.	The Office of MaineCare Services and the Maine Hospital Association have worked over the last eight months to develop a budget neutral plan to eliminate cost reimbursement in favor of prospective inpatient diagnostic related groups (DRGs) and outpatient ambulatory patient classifications (APCs). Acute care hospitals are currently paid for outpatient services based on their cost. Medicare APCs are flat, prospectively determined payments based on groups of procedures and tests. By moving to APC rates based on 86% of Medicare, hospital payments would be reduced by \$3,400,000 for fiscal year 2010-11 (state and federal).		MaineCare Hospitals	General Fund	1	745 IN	TBL	3/15/2010 \$0	(\$1,000,000)

Prog	ramCcProgram	Initiative	# InitiativeText	Initiative Justification	Initiative Notes	Secondary	Fund	Unit Line #		HHS Vote		AFA Vote FY 10 Tota	ıl F	Y 11 Total
						Class			Action	3/4	Action			
300	147 Medical Can Payments to Providers		Adjusts funding to reflect an update of the hospital tax base year from 2006 to 2008.	The department proposes to change the base year on which hospitals pay tax, moving the base year from 2006 to 2008.		MaineCare Hospitals	General Fund	1 75	I AMD	3/11 vote in as AMD			\$0	(\$11,351,537)
302	147 Medical Care Payments to Providers		- Provides funding to increase hospital reimbursement.		CP1 added. Still needs federal allocations? CP3 modifies amount from \$2,711,612	MaineCare Hospitals		1 752A	AMD	3/11 vote in as AMD			\$0	\$2,283,021
303	147 Medical Car Payments to Providers	F-A-7216	Reduces funding by lowering hospital reimbursement busing a diagnosis-related groups methodology.	The Office of MaineCare Services and the Maine Hospital Association have agreed upor a diagnosis related group (DRG) methodology. Currently each Maine hospital is paid a flat hospital-specific rate per discharge that is based on historical costs. The DRG plan will phase hospitals into a statewide rate. Each DRG is specific to the reason for the admission and weighted using Maine-specific data. The agreed upon DRG methodology is budget neutral to the rates set on July 1, 2009. This initiative reflects a reduction of approximately 4%.		MaineCare Hospitals	General Fund	1 73	4 IN		TBL	3/1/10	\$0	(\$1,237,200)
306	147 Medical Can Payments to Providers	e - F-A-7259 CP1	- Reduces funding by reducing reimbursement for inpatient psychiatric services by \$500 per discharge.	The department proposes to reduce the discharge rate for inpatient psychiatric services by \$500 per discharge. This reduction will save approximately \$1,250,000 annually (state and federal dollars).	HHS voted in prior to CP1. CP1 changes blippie only.	MaineCare Hospitals	General Fund	1 75	5 IN		TBL	3/1/10	\$0	(\$386,875)
311	147 Medical Car Payments to Providers	e - F-A-7264	Reduces funding by limiting reimbursement to 5 inpatient hospital admissions per year.	to 44 admissions. The department proposes to limit reimbursement to 5 hospital admissions. This limit would save the State approximately \$641,000 per year (General	HHS Committee voted 7-2 to support some savings and continuing deliberations to consider DHHS alternative to reduce subsequent DRG payments instead of hard 5 cap. Original GF proposal was -\$641,018 in FY 11.	Hospitals	General Fund	1 76	5 AMD	3/11 vote in as AMD Alt. prop pend.			\$0	(\$641,018)
313	732 Mental Heal Services - Community Medicaid	h F-A-7270 CP3	Reduces funding by reimbursing mental health and substance abuse outpatient hospital services consistent with MaineCare nonhospital policy. The corresponding federal funding decrease is in the Medical Care - Payments to Providers program.	MaineCare Benefits Manual. Hospitals providing such services would submit claims on a HCFA 1500 and would be reimbursed	HHS report: Voted 7-2 to support some savings and endorse continued discussions among all interested parties. Original amount was - \$780,360 in FY 11. CP3 delays by one quarter until October 1, 2010.	MaineCare Hospitals	General Fund	14 19	1 AMD	3/11 vote in as AMD			\$0	(\$584,860)

	ProgramC	Program	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit Lin	e # HHS Action	HHS Vot	AFA Action	AFA Vote FY 10 Total	FY 11 Total
314	844	Office of Substance Abuse - Medicaid Seed	F-A-7270 CP3	Reduces funding by reimbursing mental health and substance abuse outpatient hospital services consistent with MaineCare nonhospital policy. The corresponding federal funding decrease is in the Medical Care - Payments to Providers program.		\$234,577 in FY 11. CP3	MaineCare Hospitals	General Fund	1	203 AMD	3/11 vote in as AM		\$(	(\$176,077)
315	147	Medical Care - Payments to Providers	CP2	Adjusts funding as the result of the disallowance of federal financial participation for targeted case management claims in fiscal years 2001-02 and 2002-03.		CP 2 Added. Should this be fund transfer instead of appropriation?	MaineCare Other	General Fund	1	IN	Y	UNK	\$29,736,437	(\$29,736,437)
328	147	Medical Care - Payments to Providers	F-A-7269	Reduces funding by instituting several policy changes aimed at limiting the ability of individuals to shelter assets and then receive long-term care services.	The department proposes several policy changes aimed at limiting the ability for individuals to "shelter" assets and then receive long term care services. Through rule change we will clarify and strengthen the definition and application of "income producing property," redefine the equity exclusion on primary residences and require verification of the cash value of irrevocable, non-assignable and actuarially sound annuities. These changes are anticipated to save approximately \$2,150,000 annually in General Fund dollars.	language changes?	MaineCare Other	General Fund	1	778 IN	2/19/10 10-2	TBL	3/1/10 \$0	(\$2,150,000)
335	147	Medical Care - Payments to Providers	F-A-7285	Reduces funding by amending state estate recovery law as it relates to elective share and joint tenancy.	The department proposes to amend Maine estate recovery law as it relates to elective share and joint tenancy. These changes are anticipated to save up to \$2,925,200 annually in General Fund dollars. This initiative woul change the current statute so that it will not permit a denial of a spouse's rights to elective share merely because they are being support by public benefits. This change could potentially impact 6 cases and generate General Fund savings of approximately \$175,200 per year. This initiative also proposes changing the estate recovery statute to include joint tenancy in real property so long as the joint tenant is someone other then the surviving spouse. This change could impact 100 cases per year and generate General Fund savings of approximately \$2,750,000 per year.		MaineCare Other	General Fund	1	799 AMD	9-3	TBL	3/1/10 \$0	(\$2,925,200)
337		Bureau of Family Independence - Regional	HHS-D	Establishes 6 limited-period Customer Service Representative Associate II positions in the Bureau of Family Independence - Regional program to expedite disability determinations and reduce the time period for determination of disability by an average of 15 days and achieve one-time savings by decreasing payments for benefits with State funds. These positions are established for fiscal year 2010-11.		3/1/10 AFA questions on HHS proposal. See F-A-7220. See HHS Committee 2-3-10 report back Appendix D. 3/15/10 DHHS repricing costs of positions.	Other	General Fund	1	AMD		UNK	3/15/2010 \$0	
340	147	Medical Care - Payments to Providers	CP2	Provides funding to address a federal compliance issue with the reimbursement of ambulance services.		CP2 Added	MaineCare Providers	General Fund	1	IN	Y	UNK	\$(	\$889,449

F	rogramCdProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit Lin	e# HHS Action	HHS Vote	AFA Action	AFA Vote	FY 10 Total	FY 11 Tot	M tal
343	147 Medical Care - Payments to Providers	F-A-1915	Provides funding on a one-time basis to reimburse ambulatory care clinics for the administration of the H1N1 vaccine.	Approximately 70,000 children will receive the H1N1 vaccine through their school systems. Changes have been made to the MaineCare benefits manual to allow schools to bill as ambulatory care clinics for the purpose of providing and billing for the administration of the vaccine. Vaccination requires 3 courses at an administration cost of \$5 per course. Approximately 53,000 Medicaid-eligible adults will receive the H1N1 vaccine through ambulatory care clinics. Adults require one course of the vaccine with an administration cost of \$5.	3/1/10 AFA questions on details of request		General Fund	1	705 IN			3/1/10	\$330,591		\$0
346	147 Medical Care – Payments to Providers	F-A-7217 CP2	Reduces funding for the pharmacy incentive payment.	MaineCare pays a supplemental dispensing fee for prescriptions provided to members residing in rural areas in an attempt to assure continuing access to prescription services. The Pharmacy Incentive Payment dispensing fee ranges from \$0.55 to \$0.65 per prescription and changes on a quarterly basis to reflect the number of prescriptions filled in the prior quarter. This initiative will reduce the pharmacy incentive payment from an annual amount of \$2 million to \$1.57 million.	CP-2-deletes	MaineCare- Providers	General Fund	1	739 OUT		UNK	-	<del>\$0.</del>	(\$1	11 <del>4,510)</del>
353	147 Medical Care— Payments to— Providers	F A 7272 CP1 CP2	Reduces funding based on a 10% reduction to the rates paid to providers under all sections of MaineCare polic except Section 21 residential services which are reduced by 4% and hospital, physician, pharmacy and dental services.	, 1	CP2 deletes and replaces. HHS voted prior to CP2.	MaineCare- Providers	General Fund	1	782 OUT		UNK	-	<del>\$0</del>	<del>(\$14<u>.</u>°</del>	<del>519,175)</del>
357	147 Medical Care - Payments to Providers		46, Psychiatric Hospital Services; 62, Genetic Testing and Clinical Genetic Services; 68, Occupational Therapy Services; 85, Physical Therapy Services; 95,	year 2007-08 showed that a 10% reduction to rates, adjusted for tax implications, would result in General Fund savings of approximately \$34,000,000. This analysis does not include payments to or for hospitals, physicians, dental services and pharmacy. The savings have been adjusted for current savings initiatives. The 10% rates does take	of (\$5,628,561). CP 3 Modified. Blippie may need to be further modified	Providers	General Fund	1	782 OUT	N, 10-1	UNK		\$0	(\$1,5	994,571)

	ProgramCdProgram 1	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary Class	Fund	Unit L	ine # HHS Action	HHS Vote	AFA Action	AFA Vote	FY 10 Total FY	11 Total
3574		CP3	Provides funding to adjust MaineCare rates, where necessary and applicable, to actuarially-based rates. Only those rates for services that would otherwise be subject to a 10% rate reduction will be considered for the purpose of this restoration. Notwithstanding any other provision of law, the State Budget Officer shall calculate the amount of this funding that applies to any other MaineCare General Fund account in the Department of Health and Human Services and shall transfer the amounts by financial order upon the approval of the Governor. These transfers are considered adjustments to appropriation in fiscal year 2010-11.		CP3 Added. Intent appears to be to evaluate all policy sections still subject to 10% rate reduction to mitigate impact to an average of 5% reduction.	MaineCare Providers		1	782 UNK		UNK		\$0	\$1,386,923
37	8 Z037 Division of Data, Research and Vital Statistics		Provides funding on a one-time basis for program operating costs for the Health - Bureau of program and the Division of Data, Research and Vital Statistics program.	This initiative provides one-time funding for operating costs for several programs administered by the Center for Disease Control. These programs include those for health inspections, radiation, vital records, subsurface waste and for the laboratory.		Public Health	General Fund	1	1011 IN		TBL	3/1/10	\$340,000	\$0
37	9 143 Health - Bureau I of		Provides funding on a one-time basis for program operating costs for the Health - Bureau of program and the Division of Data, Research and Vital Statistics program.	This initiative provides one-time funding for operating costs for several programs administered by the Center for Disease Control. These programs include those for health inspections, radiation, vital records, subsurface waste and for the laboratory.	3/1/10 AFA questions on details of FY 10 request and fee proposal for FY 11 (LD 1592).	Public Health	General Fund	1	675 IN		TBL	3/1/10	\$1,660,000	\$0
39	5 228 Purchased I Social Services (	CP2 CP3	Reduces funding for contracted services for a variety of community supports and in fiscal year 2010-11 allows for \$60,000 to the Maine Children's Trust, Inc. to continue evidence-based parenting programs and \$140,800 for the Family Planning Association of Maine	with General Fund appropriations would be reduced. These include substance abuse services and Maine Children's Trust.	CP 2 modifies - blippie needs work. Originally proposed - \$550,000 for FY 11. Cuts - In FY10 cut totals \$150,000: Crossroads for Women \$7,474, Maine Children's Trus \$41,795 (MCT also receives OSR from tax check off of \$48,300/yr), Family Planning \$89,879, homeless youth at Shaw House (Bangor) \$10,892. In FY11 cuts total \$550,000 (for those marked E, no more funding in this account): Crossroads for Women (E) \$23,416, Maine Children's Trust (E) \$130,949 (MCT also receives OSR from tax check off of \$48,300/yr), Family Planning \$281,599, victim witness advocacy \$37,097 (E), domestic violence prevention \$42,129 (\$1.2million remains), homeless youth at Shaw House (E) (Bangor) \$34,000. CP3 partial restoration of \$150,000 for DV, Victim Assault, Shaw House, Crossroads for Women.	Services	General Fund	1	851 OUT	N, 10-1	UNK		(\$150,000)	(\$199,200)

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	ProgramCoProgram	Initiative #	InitiativeText	Initiative Justification	Initiative Notes	Secondary	Fund	Unit Line		HHS Vote			FY 10 Total	FY 1	1 Total
						Class			Action	3/4	Action				
396	844 Office of	CP2-SA-	Reduces funding by standardizing the reimbursement		Added in CP2. CP3 restored	Substance	General	1	IN	Y	UNK			\$0	(\$194,867)
		PNMI	rates for private nonmedical institutions billing under		\$200,000. Originally	Abuse	Fund								
		CP3	the MaineCare Benefits Manual Section 97, Appendix		proposed at (\$394,867).										
	Medicaid Seed		B - Substance Abuse Treatment Facilities and Appendix	K											
			E - Community Residences for Persons with Mental												
			Illness.												
200	0.4.10.00	In	In		ln								ı	40	(0100 100)
399	844 Office of				Deleted in CP2.	Substance	General-	+ 2	204 OUT	Y	UNK	-		\$0	(\$192,100)
	Substance Abuse	CP1 CP2	paid to providers under all sections of MaineCare police		1	Abuse	Fund								
			except Section 21 residential services which are	rates, adjusted for tax implications, would											
	Medicaid Seed		reduced 4% and hospital, physician, pharmacy and dental services.	result in General Fund savings of approximately \$34,000,000. This analysis											
			dental services.	11											
				does not include payments to or for hospitals,	1										
				physicians, dental services and pharmacy.											
				The savings have been adjusted for current											
				savings initiatives. The 10% rates does take											
				into account current budget initiatives.											
				Mental retardation waiver providers would have an additional 4% reduction as their											
				budgets have already been reduced by 4%.											
400	844 Office of	F-A-7272	Reduces funding for the MaineCare Benefits Manual,		Added in CP2, but corrected	Substance	General	1	UNK	Y	UNK			\$0	(\$62,046)
	Substance	CP2	Section 65, Behavioral Health Services by 10%,		to move to 0732. Original	Abuse	Fund			-					(+ ==,= 1=)
	Abuse -		excluding children's comprehensive community support		10% reduction was										
	Medicaid Seed		and multi systems therapy which will be reduced by 4%		(\$192,100).										
			and outpatient therapy and children's assertive												
			community treatment services which will not be												
			reduced. Reimbursement rates for crisis services will be												
			standardized to achieve the equivalent of 10% savings.												
			1												