

§1730. Upper payment limits for aggregate MaineCare payments to hospitals

1. Definitions. As used in this section, the following terms have the following meanings.

A. "Group of hospitals" means a group of hospitals in which each hospital meets the requirements for the same category of facility as described in 42 Code of Federal Regulations, Section 447.272 or 447.321. [PL 2023, c. 643, Pt. MM, §1 (NEW).]

B. "Hospital" means any facility in the State licensed as a hospital under chapter 405. [PL 2023, c. 643, Pt. MM, §1 (NEW).]
[PL 2023, c. 643, Pt. MM, §1 (NEW).]

2. Department to ensure compliance with upper payment limits. Beginning July 1, 2024, if aggregate MaineCare payments made to a group of hospitals exceed the upper payment limit applicable to that group of hospitals under 42 Code of Federal Regulations, Section 447.272 or 447.321, the department shall limit payments to that group of hospitals to the level that ensures compliance with the applicable upper payment limit. At least 60 days prior to taking an action pursuant to this subsection, the department shall share its upper payment calculations, including all data inputs, with the hospitals affected by the action.
[PL 2023, c. 643, Pt. MM, §1 (NEW).]

3. Adjustments when aggregate payments fall below upper payment limits. If the department limits MaineCare payments to a group of hospitals pursuant to subsection 2 and the Federal Government subsequently determines that the payments made to the group of hospitals are below the upper payment limit applicable to that group of hospitals under 42 Code of Federal Regulations, Section 447.272 or 447.321, the department shall increase the payments to an amount determined by the department, as permitted under federal regulations, and not higher than the applicable upper payment limit. The department shall notify the affected hospitals of any payments made under this subsection.
[PL 2023, c. 643, Pt. MM, §1 (NEW).]

SECTION HISTORY

PL 2023, c. 643, Pt. MM, §1 (NEW).

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