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An Act To Guarantee Access to Medically Necessary Medications during the Implementation of the Medicare Part D Prescription Drug Program

Emergency preamble. Whereas, acts of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, the Medicare Part D prescription drug program poses for many seniors and persons with disabilities great difficulties in evaluating the best drug program and in completing enrollment and placing them at risk of losing adequate drug coverage and endangering their health; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

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

Sec. 1. Report. The Department of Health and Human Services shall report 2 weeks after the effective date of this Act and bimonthly thereafter during the Second Regular Session of the 122nd Legislature and the First Regular Session of the 123rd Legislature with a final report due January 30, 2007 on the status of implementation of the Medicare Part D prescription drug program to the joint standing committee of the Legislature having jurisdiction over health matters. The reports must include a comprehensive analysis of the status of participants enrolled in the program, including the number of telephone calls for assistance received by the department from persons needing assistance in enrolling in Medicare Part D, the number of calls from persons who are unable to access necessary prescription drugs that they were previously able to access through other means, the number of persons enrolled in Medicare Part D prescription drug plans and other information quantifying the problems encountered by persons and, to the extent possible, pharmacies and other entities distributing needed medications during the implementation of the Medicare Part D prescription drug program.

Sec. 2. Medicare Part D emergency fund. The Department of Health and Human Services shall establish an emergency fund to provide 90 days, beginning January 1, 2006, of continued coverage of drugs currently provided through MaineCare or the elderly low-cost drug program under the Maine Revised Statutes, Title 22, section 254-D for persons who were not able to enroll in a Medicare Part D prescription drug plan prior to January 1, 2006 and for those persons who enrolled in a plan but are not able to access the coverage for reasons beyond their control. The fund must also provide coverage for individuals for drugs currently provided through MaineCare or the elderly low-cost drug program but that are not covered by the Medicare Part D prescription drug plan in which they are enrolled.

Sec. 3. Federal State Pharmacy Assistance Program. The Department of Health and Human Services shall study all options available for using the federal State Pharmacy Assistance Program to supplement coverage to Medicare Part D participants who would otherwise be eligible for MaineCare or the elderly low-cost drug program under the Maine Revised Statutes, Title 22, section 254-D to assist with lapses in coverage, such as the deductible or the doughnut hole. The Department of Health and Human Services shall submit its findings to the Joint Standing Committee on Health and Human Services

by April 1, 2006. The report must include details on how recipients may utilize the federal State Pharmacy Assistance Program and any prescription drug discount programs and how costs associated with those programs are applied to the deductible and doughnut hole.

Sec. 4. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF

Medical Care - Payments to Providers

Initiative: Provides additional resources for outreach to persons eligible for benefits under the Medicare Part D prescription drug program and prescription drug benefits under the MaineCare program under the Maine Revised Statutes, Title 22, section 3174-G or waivers obtained by the State under the MaineCare program. These resources will be used to help link people to the appropriate prescription drug coverage to prevent their being put at risk and to enable them to obtain medically necessary prescription drugs in a timely manner.

GENERAL FUND	2005-06	2006-07
All Other	\$200,000	\$200,000
GENERAL FUND TOTAL	\$200,000	\$200,000

Medical Care - Payments to Providers

Initiative: Provides additional resources for outreach to persons eligible for benefits under the Medicare Part D prescription drug program and prescription drug benefits under the MaineCare program under the Maine Revised Statutes, Title 22, section 3174-G or waivers obtained by the State under the MaineCare program. These resources will be used to help link people to the appropriate prescription drug coverage to prevent their being put at risk and to enable them to obtain medically necessary prescription drugs in a timely manner.

FEDERAL EXPENDITURES FUND	2005-06	2006-07
All Other	\$356,000	\$356,000
FEDERAL EXPENDITURES FUND TOTAL	\$356,000	\$356,000

Elderly Low-cost Drug Program

Initiative: Provides additional resources for outreach to persons eligible for benefits under the Medicare Part D prescription drug program and prescription drug benefits under the elderly low-cost drug program under the Maine Revised Statutes, Title 22, section 254-D. These resources will be used to help link people to the appropriate prescription drug coverage to prevent their being put at risk and to enable them to obtain medically necessary prescription drugs in a timely manner.

LD 1959, item 1122nd Maine State Legislature
 An Act To Guarantee Access to Medically Necessary Medications during
 the Implementation of the Medicare Part D Prescription Drug Program

GENERAL FUND	2005-06	2006-07
All Other	\$400,000	\$400,000
GENERAL FUND TOTAL	\$400,000	\$400,000
HEALTH AND HUMAN SERVICES, DEPARTMENT OF		
DEPARTMENT TOTALS		
GENERAL FUND	2005-06	2006-07
FEDERAL EXPENDITURES FUND	\$600,000	\$600,000
	\$356,000	\$356,000
DEPARTMENT TOTAL - ALL FUNDS		
	\$956,000	\$956,000

Emergency clause. In view of the emergency cited in the preamble, this Act takes effect when approved.

SUMMARY

This bill directs the Department of Health and Human Services to report 2 weeks after the effective date of this bill and thereafter bimonthly until January 30, 2007 on the status of implementation of the Medicare Part D prescription drug program to the joint standing committee of the Legislature having jurisdiction over health matters. The reports must include a comprehensive analysis of the status of participants enrolled in the program, including the number of telephone calls received by the department from persons needing assistance in enrolling in Medicare Part D, the number of calls from persons who are unable to access necessary prescription drugs that they were previously able to access through other means, the number of persons enrolled in Medicare Part D prescription drug plans and other information quantifying the problems encountered by persons and, to the extent possible, pharmacies and other entities distributing needed medications during the implementation of the Medicare Part D prescription drug program. This bill contains appropriations and allocations for outreach under the MaineCare program and the elderly low-cost drug program. The appropriations are for \$200,000 for each year for Medicaid seed money and \$400,000 for each year for the elderly low-cost drug program. The allocations are for federal matching funds to match the Medicaid seed funds. All funding is for outreach to link eligible persons with the appropriate Medicare Part D prescription drug plans.

The bill also directs the Department of Health and Human Services to establish a Medicare Part D emergency fund that will provide 90 days from January 1, 2006 of continued coverage of drugs that are currently provided through MaineCare or the elderly low-cost drug program. The bill also directs the Department of Health and Human Services to study all options available for using the federal State Pharmacy Assistance Program and to present its results to the Joint Standing Committee on Health and Human Services by April 1, 2006.