L.D. 1466	1		
Date: (Filing No. S- )	2		
HEALTH AND HUMAN SERVICES	3		
Reproduced and distributed under the direction of the Secretary of the Senate.	4		
STATE OF MAINE	5		
SENATE			
128TH LEGISLATURE	7		
FIRST REGULAR SESSION			
COMMITTEE AMENDMENT " " to S.P. 512, L.D. 1466, Bill, "An Act To Address Severe and Ongoing Shortfalls in the Funding of Direct Care Workers in Longterm Care Settings and To Establish the Commission To Study Long-term Care Workforce Issues"	9 10 11 12		
Amend the bill in section 1 by striking out all of subsection 2 (page 1, lines 33 to 35 in L.D.) and inserting the following:	13 14		
<b>'2. Rate increases for fiscal year 2018-19 and thereafter.</b> For the state fiscal year ending June 30, 2019 and each year thereafter, the MaineCare payment rates for personal care and related services under each of the provisions under this section calculated under subsection 1 must be increased by an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index.'	15 16 17 18 19 20		
Amend the bill in section 2 by striking out all of subsection 2 (page 2, lines 8 to 11 in L.D.) and inserting the following:	21 22		
'2. Rate increases for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, the MaineCare payment rates attributable to wages and salaries for personal care and related services under each of the provisions under this section calculated under subsection 1 must be increased by an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index.	23 24 25 26 27 28 29 30		
<b>3. Rate study.</b> Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for adult family care services, adult day services or homemaker services and the rates in the rate study have been implemented.'	31 32 33 34 35		

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Amend the bill in section 3 by striking out all of subsection 2 (page 2, lines 30 to 41 in L.D.) and inserting the following:

- '2. Rate increases for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, an additional extraordinary circumstance supplemental allowance must be made as required by section 34 of the Principles of Reimbursement for Nursing Facilities equal to the amount of an inflation adjustment costof-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index of the portion of each facility's prospective and final prospective rate that is attributable to wages and wage-related benefits in both the direct care cost component and the routine care cost component. This supplemental allowance must be provided as part of each facility's prospective rate, notwithstanding any otherwise applicable caps or limits on reimbursement. This supplemental allowance must also be allowed and paid at final audit to the full extent that the facility has reported increased costs for wages and wage-related benefits, notwithstanding any otherwise applicable caps or limits on reimbursement, including without limitation the amount of the supplemental allowance added to prospective payment rates.
- **3. Rate study.** Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for nursing facilities and the rates in the rate study have been implemented.'

Amend the bill in section 4 by striking out all of subsection 2 (page 3, lines 17 to 29 in L.D.) and inserting the following:

- 2. Rate increase for fiscal year 2018-19 and thereafter until completion of rate study. For the state fiscal year ending June 30, 2019 and each year thereafter until the completion of the rate study under subsection 3, additional reimbursement by a supplemental payment in the amount of an inflation adjustment cost-of-living percentage change in reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index over the payment rate calculated under subsection 1 of the portion of the facility's per diem rate that is attributable to wages, wage-related benefits and workers' compensation must be added to the per diem rate until the department adjusts the direct care pricer, the routine limit and the personal care services limit, as applicable, to incorporate this increase going forward. This increase must be provided as part of each facility's per diem rate notwithstanding any otherwise applicable caps or limits on reimbursement. This supplemental payment must also be allowed and paid at final audit to the full extent that the facility has reported increased costs for wages, wage-related benefits and workers' compensation, notwithstanding any otherwise applicable caps or limits on reimbursement, including without limitation the amount of the supplemental payment added to prospective payment rates.
- **3. Rate study.** Cost-of-living increases as described in subsection 2 must continue on an annual basis until the Department of Health and Human Services has completed a rate study conducted by a 3rd party, including participation of providers, for residential care facilities and the rates in the rate study have been implemented.'

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1 2	Amend the bill in section 5 in subsection 9 in the first line (page 5, line 30 in L.D.) by striking out the following: "October 15" and inserting the following: 'December 2'			
3	Amend the bill by inserting after section 5 the following:			
4 5	'Sec. 6. Appropriations and allocations. allocations are made.	The following appro	opriations and	
6	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)			
7	Developmental Services - Community 0122			
8	Initiative: Provides appropriations for an increase to rates for certain services.			
9	GENERAL FUND	2017-18	2018-19	
10 11	All Other	\$66,990	\$96,465	
12	GENERAL FUND TOTAL	\$66,990	\$96,465	
13	Long Term Care - Office of Aging and Disability Services 0420			
14	Initiative: Provides appropriations for an increase to rates for certain services.			
1.5				
15	GENERAL FUND	2017-18	2018-19	
16	GENERAL FUND All Other	<b>2017-18</b> \$929,673	<b>2018-19</b> \$1,421,378	
16 17	All Other	\$929,673	\$1,421,378	
16 17 18	All Other GENERAL FUND TOTAL	\$929,673	\$1,421,378	
16 17 18 19 20	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations for the second s	\$929,673	\$1,421,378	
16 17 18 19 20 21 22 23	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations asservices.	\$929,673 \$929,673 For an increase to rat	\$1,421,378 \$1,421,378 es for certain	
16 17 18 19 20 21	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations asservices.  GENERAL FUND	$$929,673$ $\hline $929,673$ for an increase to rat $2017-18$	\$1,421,378 \$1,421,378 es for certain 2018-19	
16 17 18 19 20 21 22 23 24 25	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations asservices.  GENERAL FUND  All Other  GENERAL FUND TOTAL	\$929,673 \$929,673 for an increase to rate  2017-18 \$6,405,351 \$6,405,351	\$1,421,378 \$1,421,378 es for certain 2018-19 \$9,585,335 \$9,585,335	
16 17 18 19 20 21 22 23 24 25	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations asservices.  GENERAL FUND  All Other  GENERAL FUND TOTAL  FEDERAL EXPENDITURES FUND	\$929,673 \$929,673 for an increase to rat  2017-18 \$6,405,351 \$6,405,351	\$1,421,378 \$1,421,378 es for certain 2018-19 \$9,585,335 \$9,585,335	
16 17 18 19 20 21 22 23 24 25	All Other  GENERAL FUND TOTAL  Medical Care - Payments to Providers 0147  Initiative: Provides appropriations and allocations asservices.  GENERAL FUND  All Other  GENERAL FUND TOTAL	\$929,673 \$929,673 for an increase to rate  2017-18 \$6,405,351 \$6,405,351	\$1,421,378 \$1,421,378 es for certain 2018-19 \$9,585,335 \$9,585,335	

1 2 3	OTHER SPECIAL REVENUE FUNDS All Other	<b>2017-18</b> \$773,294	<b>2018-19</b> \$1,214,774
4	OTHER SPECIAL REVENUE FUNDS TOTAL	\$773,294	\$1,214,774
5	Nursing Facilities 0148		
6 7	Initiative: Provides appropriations and allocations for services.	an increase to rat	tes for certain
8	GENERAL FUND	2017-18	2018-19
9 10	All Other	\$18,901,499	\$24,563,125
11	GENERAL FUND TOTAL	\$18,901,499	\$24,563,125
12	OTHER SPECIAL REVENUE FUNDS	2017-18	2018-19
13	All Other	\$1,661,427	\$2,609,923
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15	OTHER SPECIAL REVENUE FUNDS TOTAL	\$1,661,427	\$2,609,923
16	PNMI Room and Board Z009		
17	Initiative: Provides appropriations for an increase to rates	for certain service	es.
18	GENERAL FUND	2017-18	2018-19
19	All Other	\$1,031,058	\$1,619,699
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21	GENERAL FUND TOTAL	\$1,031,058	\$1,619,699
22	HEALTH AND HUMAN SERVICES,		
23	DEPARTMENT OF (FORMERLY DHS)	2015 10	2010 10
24 25	DEPARTMENT TOTALS	2017-18	2018-19
26	GENERAL FUND	\$27,334,571	\$37,286,002
27	FEDERAL EXPENDITURES FUND	\$20,085,327	\$35,811,906
28	OTHER SPECIAL REVENUE FUNDS	\$2,434,721	\$3,824,697
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30 31	DEPARTMENT TOTAL - ALL FUNDS	\$49,854,619	\$76,922,605
32	SUMMARY		
33 34	This amendment, which is the majority report of the changes to the bill.	committee, makes	the following

Page 4 - 128LR1387(02)-1

## **COMMITTEE AMENDMENT**

1 2 3 4 5	1. Instead of the 10% increase proposed in the bill, the amendment provides that rate increases for fiscal year 2018-19 for all services in the bill must be paid according to the inflation adjustment cost-of-living percentage change to reimbursement in accordance with the United States Department of Labor, Bureau of Labor Statistics, Consumer Price Index medical care services index.
6 7 8 9	2. The amendment provides that rate increases for fiscal year 2019-20 and annually thereafter for those services must be paid using the same adjustment as fiscal year 2018-19 until a rate study has been completed by the Department of Health and Human Services, conducted by a 3rd party and including the participation of providers, and the rates in the rate study have been implemented.
11 12	3. It changes the date of the report from the Commission To Study Long-term Care Workforce Issues from October 15, 2017 to December 2, 2017.
13	4. It adds an appropriations and allocations section.
14	FISCAL NOTE REQUIRED
15	(See attached)