1 2	Emergency preamble. Whereas, acts and resolves of the Leg become effective until 90 days after adjournment unless enacted as emerge		
3 4	Whereas, the 90-day period may not terminate until after the beginning of the next fiscal year; and		
5 6	Whereas, certain obligations and expenses incident to the operation of state departments and institutions will become due and payable immediately; and		
7 8 9 10	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,		
11	Be it enacted by the People of the State of Maine as follows:		
12	PART A		
13 14	Sec. A-1. Appropriations and allocations. The following appallocations are made.	propriations and	
15	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORME	RLY BDS)	
16	Developmental Services - Community 0122		
17 18	Initiative: Reduces funding for reimbursement in rental assistance to Department of Housing and Urban Development levels.	United States	
19 20 21	GENERAL FUND All Other \$0		
22	GENERAL FUND TOTAL \$0	(\$1,200,000)	
23	Developmental Services Waiver - MaineCare 0987		
24 25	Initiative: Provides funding in the MaineCare and MaineCare-related acc to make cycle payments through the remainder of the 2012-2013 biennium	•	
26 27 28	GENERAL FUND All Other 2011-12 \$5,808,535		
29	GENERAL FUND TOTAL \$5,808,535	\$6,299,768	
30	Developmental Services Waiver - MaineCare 0987		
31 32	Initiative: Adjusts funding for Medicaid services as a result of the decreas Medical Assistance Percentage.	e of the Federal	

1 2	GENERAL FUND All Other	2011-12 \$0	2012-13 \$1,190,669
3 4	GENERAL FUND TOTAL	\$0	\$1,190,669
5	Developmental Services Waiver - MaineCare 0	987	
6 7	Initiative: Reduces funding to reflect savings from Services Waiver - MaineCare program.	n payment reform in the I	Developmental
8 9	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$3,000,000)
10 11	GENERAL FUND TOTAL	\$0	(\$3,000,000)
12	Developmental Services Waiver - Supports Z00	06	
13 14	Initiative: Provides funding in the MaineCare and to make cycle payments through the remainder of		
15 16 17	GENERAL FUND All Other	2011-12 \$1,967,371	2012-13 \$5,658,034
18	GENERAL FUND TOTAL	\$1,967,371	\$5,658,034
19	Developmental Services Waiver - Supports Z00	06	
20 21	Initiative: Adjusts funding for Medicaid services a Medical Assistance Percentage.	as a result of the decrease	of the Federal
22 23 24	GENERAL FUND All Other	2011-12 \$0	2012-13 \$91,346
25	GENERAL FUND TOTAL	\$0	\$91,346
26	Disproportionate Share - Dorothea Dix Psychia	atric Center 0734	
27 28	Initiative: Adjusts funding for Medicaid services a Medical Assistance Percentage.	as a result of the decrease	of the Federal
29	GENERAL FUND	2011-12	2012-13
30 31	Personal Services	\$0	\$73,700
32	GENERAL FUND TOTAL	\$0	\$73,700

Disproportionate Share - Riverview Psychiatric Center 0733

1 2	Initiative: Adjusts funding for Medicaid services as a resu Medical Assistance Percentage.	ult of the decrease	of the Federal
3	GENERAL FUND	2011-12	2012-13
4	Personal Services	\$0	\$111,280
5	All Other	\$0	\$40,232
6			
7	GENERAL FUND TOTAL	\$0	\$151,512
8	Dorothea Dix Psychiatric Center 0120		
9 10	Initiative: Adjusts funding for Medicaid services as a resumedical Assistance Percentage.	ult of the decrease	of the Federal
11	OTHER SPECIAL REVENUE FUNDS	2011-12	2012-13
12	Personal Services	\$0	(\$73,700)
13			
14	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	(\$73,700)
15	FHM - Substance Abuse 0948		
16 17	Initiative: Adjusts funding for Medicaid services as a resumedical Assistance Percentage.	ult of the decrease	of the Federal
18	FUND FOR A HEALTHY MAINE	2011-12	2012-13
19	All Other	\$0	\$17,976
20 21	FUND FOR A HEALTHY MAINE TOTAL	\$0	\$17,976
22	Medicaid Services - Developmental Services 0705		
23 24	Initiative: Reduces funding by eliminating targeted ca optional service in the MaineCare program.	se management	services as an
25	GENERAL FUND	2011-12	2012-13
26	All Other	(\$389,340)	(\$1,772,320)
27			
28	GENERAL FUND TOTAL	(\$389,340)	(\$1,772,320)
29	Medicaid Services - Developmental Services 0705		
30 31	Initiative: Reduces funding by eliminating private nonmoptional service in the MaineCare program effective July		services as an
	1	*	

1 2	OTHER SPECIAL REVENUE FUNDS All Other	2011-12 \$0	2012-13 (\$83,408)
3 4	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	(\$83,408)
5	Medicaid Services - Developmental Services 0705		
6 7	Initiative: Provides funding in the MaineCare and MaineCommunity to make cycle payments through the remainder of the 2012		ints necessary
8	GENERAL FUND	2011-12	2012-13
9 10	All Other	\$0	\$1,201,050
11	GENERAL FUND TOTAL	\$0	\$1,201,050
12	Medicaid Services - Developmental Services 0705		
13 14	Initiative: Adjusts funding for Medicaid services as a resu Medical Assistance Percentage.	alt of the decrease	of the Federal
15	GENERAL FUND	2011-12	2012-13
16 17	All Other	\$0	\$592,079
18	GENERAL FUND TOTAL	\$0	\$592,079
19	Mental Health Services - Child Medicaid 0731		
20 21 22	Initiative: Reduces funding by eliminating optional of program for persons 19 and 20 years of age with income lenonfarm income official poverty line.		
23	GENERAL FUND	2011-12	2012-13
24	All Other	(\$64,775)	(\$351,600)
25 26	GENERAL FUND TOTAL	(\$64,775)	(\$351,600)
27	Mental Health Services - Child Medicaid 0731		
28 29	Initiative: Provides funding in the MaineCare and Maine to make cycle payments through the remainder of the 2012		ints necessary
30	GENERAL FUND	2011-12	2012-13
31 32	All Other	\$5,290,051	\$4,709,869
33	GENERAL FUND TOTAL	\$5,290,051	\$4,709,869

1	Mental Health Services - Child Medicaid 0731		
2 3	Initiative: Adjusts funding for Medicaid services as a result of the decrease of the Feder Medical Assistance Percentage.		
4 5	GENERAL FUND All Other	2011-12 \$0	2012-13 \$470,754
6 7	GENERAL FUND TOTAL	\$0	\$470,754
8	Mental Health Services - Child Medicaid 0731		
9 10	Initiative: Reduces funding by reducing optional covbehaviorally challenged and who are in a residential setting	-	lren who are
11 12 13	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$500,000)
14	GENERAL FUND TOTAL	\$0	(\$500,000)
15	Mental Health Services - Children 0136		
16 17 18 19	Initiative: Adjusts funding for the 2012-2013 biennium of for families with income greater or equal to 150% but le income official poverty line as the result of contributions to provide MaineCare seed for the program.	ess than 200% o	of the nonfarm
20	GENERAL FUND	2011-12	2012-13
21 22	All Other	(\$17,392)	(\$94,426)
23	GENERAL FUND TOTAL	(\$17,392)	(\$94,426)
24	Mental Health Services - Children 0136		
25	Initiative: Reduces funding by reducing contracts for resident	ential services.	
26 27 28	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$1,250,000)
29	GENERAL FUND TOTAL	\$0	(\$1,250,000)
30	Mental Health Services - Community 0121		
31 32	Initiative: Reduces funding by limiting the availability of r to persons who experience severe and persistent mental illu		is intervention

1 2	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$2,084,746)
3 4	GENERAL FUND TOTAL	\$0	(\$2,084,746)
5 6 7	FEDERAL BLOCK GRANT FUND All Other	2011-12 \$0	2012-13 (\$91,369)
8	FEDERAL BLOCK GRANT FUND TOTAL	\$0	(\$91,369)
9	Mental Health Services - Community Medicaid 0732		
10 11 12	Initiative: Reduces funding by eliminating optional program for persons 19 and 20 years of age with income nonfarm income official poverty line.	•	
13 14	GENERAL FUND All Other	2011-12 (\$37,593)	2012-13 (\$204,059)
15 16	GENERAL FUND TOTAL	(\$37,593)	(\$204,059)
17	Mental Health Services - Community Medicaid 0732		
18 19	Initiative: Reduces funding by eliminating private nonroptional service in the MaineCare program effective July		services as an
20 21 22	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$12,754,745)
23	GENERAL FUND TOTAL	\$0	(\$12,754,745)
24 25	OTHER SPECIAL REVENUE FUNDS All Other	2011-12 \$0	2012-13 (\$341,170)
26 27	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	(\$341,170)
28	Mental Health Services - Community Medicaid 0732		
29 30	Initiative: Adjusts funding for Medicaid services as a res Medical Assistance Percentage.	sult of the decrease	e of the Federal

1 2	GENERAL FUND All Other	2011-12 \$0	2012-13 \$614,409
3			
4	GENERAL FUND TOTAL	\$0	\$614,409
5	Office of Substance Abuse - Medicaid Seed 0844		
6 7	Initiative: Reduces funding by eliminating private nonm optional service in the MaineCare program effective July		services as an
8	OTHER SPECIAL REVENUE FUNDS	2011-12	2012-13
9	All Other	\$0	(\$89,487)
10 11	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	(\$89,487)
12	Office of Substance Abuse - Medicaid Seed 0844		
13	Initiative: Provides funding in the MaineCare and Maine	Care-related accou	ints necessary
14	to make cycle payments through the remainder of the 201		
15	GENERAL FUND	2011-12	2012-13
16	All Other	\$983,953	\$869,928
17 18	GENERAL FUND TOTAL	\$983,953	\$869,928
19	Office of Substance Abuse - Medicaid Seed 0844		
20 21	Initiative: Adjusts funding for Medicaid services as a resu Medical Assistance Percentage.	alt of the decrease	of the Federal
22	GENERAL FUND	2011-12	2012-13
23	All Other	\$0	\$53,748
24 25	GENERAL FUND TOTAL	\$0	\$53,748
26	Riverview Psychiatric Center 0105		
27 28	Initiative: Adjusts funding for Medicaid services as a resu Medical Assistance Percentage.	alt of the decrease	of the Federal
29	OTHER SPECIAL REVENUE FUNDS	2011-12	2012-13
30	Personal Services	\$0	(\$111,280)
31 32	All Other	\$0	(\$40,232)
33	OTHER SPECIAL REVENUE FUNDS TOTAL	\$0	(\$151,512)

1 **Traumatic Brain Injury Seed Z042** 2 Initiative: Adjusts funding for Medicaid services as a result of the decrease of the Federal 3 Medical Assistance Percentage. 4 GENERAL FUND 2011-12 2012-13 5 All Other \$0 \$1,669 6 7 GENERAL FUND TOTAL \$0 \$1,669 8 HEALTH AND HUMAN SERVICES, 9 **DEPARTMENT OF (FORMERLY BDS)** 10 DEPARTMENT TOTALS 2011-12 2012-13 11 GENERAL FUND \$13,540,810 (\$1,233,361) 12. 13 **FUND FOR A HEALTHY MAINE \$0** \$17,976 14 OTHER SPECIAL REVENUE FUNDS **\$0** (\$739,277)15 FEDERAL BLOCK GRANT FUND \$0 (\$91,369)16 \$13,540,810 17 **DEPARTMENT TOTAL - ALL FUNDS** (\$2,046,031)HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS) 18 **Bureau of Medical Services 0129** 19 20 Initiative: Adjusts funding for the 2012-2013 biennium only for the Cub Care program for families with income greater or equal to 150% but less than 200% of the nonfarm 21 22 income official poverty line as the result of contributions from the Dirigo Health Fund to 23 provide MaineCare seed for the program. 24 GENERAL FUND 2011-12 2012-13 1) 1)

	GETTERE I CTIE	2011 12	
25	All Other	(\$44,413)	(\$241,124)
26			
27	GENERAL FUND TOTAL	(\$44,413)	(\$241,124)

Departmentwide 0640

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Initiative: Reduces funding from salary savings. Notwithstanding any other provision of law, the State Budget Officer shall calculate the amount of savings in this Part that applies to each 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 appropriations in fiscal year 2011-12.

1 2	GENERAL FUND Personal Services	2011-12 (\$5,000,000)	2012-13 (\$3,000,000)
3 4	GENERAL FUND TOTAL	(\$5,000,000)	(\$3,000,000)
5	FHM - Bureau of Health 0953		
6 7	Initiative: Reduces funding to reflect a redistribution of Maine.	f funding in the Fun	d for a Healthy
8 9 10	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$10,783,273)
11	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$10,783,273)
12	FHM - Donated Dental 0958		
13 14	Initiative: Reduces funding to reflect a redistribution of Maine.	f funding in the Fun	d for a Healthy
15 16 17	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$36,463)
18	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$36,463)
19	FHM - Drugs for the Elderly and Disabled Z015		
20 21 22	Initiative: Reduces funding by eliminating the coin prescription drugs and the payment of Medicare Part receiving benefits from the Low-cost Drugs To Maine'	D premiums for cert	
23	FUND FOR A HEALTHY MAINE	2011-12	2012-13
24 25	All Other	(\$247,964)	(\$1,322,475)
26	FUND FOR A HEALTHY MAINE TOTAL	(\$247,964)	(\$1,322,475)
27	FHM - Drugs for the Elderly and Disabled Z015		
28 29 30	Initiative: Reduces funding by reducing the number of for which reimbursement is allowed from 4 to 2 pe determined to be medically necessary.	• •	•
31 32 33	FUND FOR A HEALTHY MAINE All Other	2011-12 (\$55,880)	2012-13 (\$279,402)

1	FUND FOR A HEALTHY MAINE TOTAL	(\$55,880)	(\$279,402)
2	FHM - Drugs for the Elderly and Disabled Z015		
3 4	Initiative: Reduces funding to reflect a redistribution of Maine.	funding in the Fun	d for a Healthy
5 6 7	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$10,332,353)
8	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$10,332,353)
9	FHM - Family Planning 0956		
10 11	Initiative: Reduces funding to reflect a redistribution of Maine.	funding in the Fun	d for a Healthy
12 13 14	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$401,430)
15	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$401,430)
16	FHM - Head Start 0959		
17 18	Initiative: Reduces funding to reflect a redistribution of Maine.	funding in the Fun	d for a Healthy
19 20 21	FUND FOR A HEALTHY MAINE All Other	2011-12 (\$700,000)	2012-13 (\$1,354,580)
22	FUND FOR A HEALTHY MAINE TOTAL	(\$700,000)	(\$1,354,580)
23	FHM - Immunization Z048		
24 25	Initiative: Reduces funding to reflect a redistribution of Maine.	funding in the Fun	d for a Healthy
26 27 28	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$1,078,884)
29	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$1,078,884)

30

FHM - Medical Care 0960

1 2	Initiative: Adjusts funding for Medicaid services as a result Medical Assistance Percentage.	ult of the decrease	in the Federal
3 4 5	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 \$113,010
6	FUND FOR A HEALTHY MAINE TOTAL	\$0	\$113,010
7	FHM - Medical Care 0960		
8 9 10 11	Initiative: Notwithstanding any provision of law, adjusts the Medical Care - Payments to Providers program and Medical Care program to reflect a redistribution of funding Maine.	reducing funding	in the FHM -
12 13	FUND FOR A HEALTHY MAINE All Other	2011-12 \$1,003,844	2012-13 \$25,031,096
14 15	FUND FOR A HEALTHY MAINE TOTAL	\$1,003,844	\$25,031,096
16	FHM - Purchased Social Services 0961		
17 18	Initiative: Reduces funding to reflect a redistribution of fundame.	unding in the Fund	d for a Healthy
19 20 21	FUND FOR A HEALTHY MAINE All Other	2011-12 \$0	2012-13 (\$3,942,236)
22	FUND FOR A HEALTHY MAINE TOTAL	\$0	(\$3,942,236)
23	Head Start 0545		
24	Initiative: Eliminates funding for the Head Start program.		
25	GENERAL FUND	2011-12	2012-13
26 27	All Other	(\$800,000)	(\$2,448,875)
28	GENERAL FUND TOTAL	(\$800,000)	(\$2,448,875)
29	IV-E Foster Care/Adoption Assistance 0137		
30 31	Initiative: Adjusts funding for Medicaid services as a resumedical Assistance Percentage.	ult of the decrease	in the Federal

1 2	GENERAL FUND All Other	2011-12 \$0	2012-13 \$13,579
3 4	GENERAL FUND TOTAL	\$0	\$13,579
5	Low-cost Drugs To Maine's Elderly 0202		
6 7 8	Initiative: Reduces funding by eliminating the coinsuran prescription drugs and the payment of Medicare Part D pre receiving benefits from the Low-cost Drugs To Maine's Elder	miums for cert	
9 10 11	GENERAL FUND All Other	2011-12 (\$836,743)	2012-13 (\$4,462,786)
12	GENERAL FUND TOTAL	(\$836,743)	(\$4,462,786)
13	Low-cost Drugs To Maine's Elderly 0202		
14 15	Initiative: Provides funding in the MaineCare and MaineCa to make cycle payments through the remainder of the 2012-		•
16 17	GENERAL FUND All Other	2011-12 \$1,401,437	2012-13 \$0
18 19	GENERAL FUND TOTAL	\$1,401,437	\$0
20	Medical Care - Payments to Providers 0147		
21 22 23 24	Initiative: Adjusts funding for the 2012-2013 biennium or for families with income greater or equal to 150% but les income official poverty line as the result of contributions fr provide MaineCare seed for the program.	ss than 200% o	of the nonfarm
25 26	GENERAL FUND All Other	2011-12 (\$410,995)	2012-13 (\$2,231,331)
27 28	GENERAL FUND TOTAL	(\$410,995)	(\$2,231,331)
29 30 31	OTHER SPECIAL REVENUE FUNDS All Other	2011-12 \$472,800	2012-13 \$2,556,881
32	OTHER SPECIAL REVENUE FUNDS TOTAL	\$472,800	\$2,556,881
33	Medical Care - Payments to Providers 0147		

1 2	Initiative: Reduces funding by eliminating optional coverage under the MaineCare program for families who are covered above mandatory federal levels.			
3 4 5	GENERAL FUND All Other	2011-12 (\$2,184,239)	2012-13 (\$8,533,575)	
6	GENERAL FUND TOTAL	(\$2,184,239)	(\$8,533,575)	
7 8 9	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$5,791,515)	2012-13 (\$30,571,405)	
10	FEDERAL EXPENDITURES FUND TOTAL	(\$5,791,515)	(\$30,571,405)	
11 12 13	OTHER SPECIAL REVENUE FUNDS All Other	2011-12 (\$1,159,127)	2012-13 (\$9,614,390)	
14	OTHER SPECIAL REVENUE FUNDS TOTAL	(\$1,159,127)	(\$9,614,390)	
15	Medical Care - Payments to Providers 0147			
16 17 18	Initiative: Reduces funding by eliminating optional corprogram for persons 19 and 20 years of age with income less nonfarm income official poverty line.			
19	GENERAL FUND	2011-12	2012-13	
20 21	All Other	(\$993,649)	(\$5,393,575)	
22	GENERAL FUND TOTAL	(\$993,649)	(\$5,393,575)	
23 24 25	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$1,898,564)	2012-13 (\$10,021,863)	
26	FEDERAL EXPENDITURES FUND TOTAL	(\$1,898,564)	(\$10,021,863)	
27	Medical Care - Payments to Providers 0147			
28 29	Initiative: Reduces funding by eliminating adult family car MaineCare program.	e as an optiona	l service in the	

1 2 3 4	GENERAL FUND All Other GENERAL FUND TOTAL	2011-12 (\$40,810) (\$40,810)	2012-13 (\$220,068) (\$220,068)
5 6 7	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$68,641)	2012-13 (\$362,332)
8	FEDERAL EXPENDITURES FUND TOTAL	(\$68,641)	(\$362,332)
9	Medical Care - Payments to Providers 0147		
10 11	Initiative: Reduces funding by eliminating ambulatory optional service in the MaineCare program.	surgical center s	services as an
12 13 14	GENERAL FUND All Other	2011-12 (\$17,200)	2012-13 (\$93,274)
15	GENERAL FUND TOTAL	(\$17,200)	(\$93,274)
16 17 18 19	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL	2011-12 (\$28,155) (\$28,155)	2012-13 (\$148,619) (\$148,619)
20	Medical Care - Payments to Providers 0147		
21 22	Initiative: Reduces funding by eliminating consumer-di optional service in the MaineCare program.	rected attendant	services as an
23 24 25	GENERAL FUND All Other	2011-12 (\$449,605)	2012-13 (\$2,440,130)
26	GENERAL FUND TOTAL	(\$449,605)	(\$2,440,130)
27 28 29	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$772,450)	2012-13 (\$4,077,499)
30	FEDERAL EXPENDITURES FUND TOTAL	(\$772,450)	(\$4,077,499)
31	Medical Care - Payments to Providers 0147		

1 2	Initiative: Reduces funding by eliminating targeted case optional service in the MaineCare program.	e management	services as an
3	GENERAL FUND	2011-12	2012-13
4	All Other	(\$94,312)	(\$429,320)
5	GENERAL EVAN MOMAN	(\$0.4.212)	<u> </u>
6	GENERAL FUND TOTAL	(\$94,312)	(\$429,320)
7	FEDERAL EXPENDITURES FUND	2011-12	2012-13
8	All Other	(\$908,725)	(\$4,846,533)
9 10	FEDERAL EXPENDITURES FUND TOTAL	(\$908,725)	(\$4,846,533)
10	FEDERAL EXFENDITURES FUND TOTAL	(\$908,723)	(\$4,640,333)
11	Medical Care - Payments to Providers 0147		
12	Initiative: Reduces funding by eliminating dental services	s as an optional	service in the
13	MaineCare program.		
14	GENERAL FUND	2011-12	2012-13
15	All Other	(\$410,611)	(\$2,225,611)
16 17	GENERAL FUND TOTAL	(\$410,611)	(\$2,225,611)
17	GENERAL FUND TOTAL	(\$410,011)	(\$2,223,011)
18	FEDERAL EXPENDITURES FUND	2011-12	2012-13
19	All Other	(\$652,668)	(\$3,445,208)
20		(Φ.550, 660)	(0.445.000)
21	FEDERAL EXPENDITURES FUND TOTAL	(\$652,668)	(\$3,445,208)
22	Medical Care - Payments to Providers 0147		
23	Initiative: Reduces funding by eliminating occupational th	erapy as an opti	onal service in
24	the MaineCare program.		
25	GENERAL FUND	2011-12	2012-13
26	All Other	(\$78,846)	(\$426,996)
27 28	GENERAL FUND TOTAL	(\$78,846)	(\$426,996)
20	GENERAL FUND TOTAL	(\$70,040)	(ψ 1 ∠0,770)

1 2 3	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$124,966)	2012-13 (\$659,650)
4	FEDERAL EXPENDITURES FUND TOTAL	(\$124,966)	(\$659,650)
5	Medical Care - Payments to Providers 0147		
6 7	Initiative: Reduces funding by eliminating vision servic MaineCare program.	es as an optional	service in the
8	GENERAL FUND	2011-12	2012-13
9	All Other	(\$151,826)	(\$823,447)
10 11	GENERAL FUND TOTAL	(\$151,826)	(\$823,447)
12	FEDERAL EXPENDITURES FUND	2011-12	2012-13
13 14	All Other	(\$250,663)	(\$1,323,161)
15	FEDERAL EXPENDITURES FUND TOTAL	(\$250,663)	(\$1,323,161)
16	Medical Care - Payments to Providers 0147		
17 18	Initiative: Reduces funding by eliminating physical thera MaineCare program.	apy as an optional	service in the
19	GENERAL FUND	2011-12	2012-13
20	All Other	(\$97,657)	(\$529,071)
21 22	GENERAL FUND TOTAL	(\$97,657)	(\$529,071)
23	FEDERAL EXPENDITURES FUND	2011-12	2012-13
24 25	All Other	(\$158,352)	(\$835,885)
26	FEDERAL EXPENDITURES FUND TOTAL	(\$158,352)	(\$835,885)
27	Medical Care - Payments to Providers 0147		
28 29	Initiative: Reduces funding by eliminating podiatry servi MaineCare program.	ces as an optional	service in the

1 2	GENERAL FUND All Other	2011-12 (\$68,407)	2012-13 (\$370,903)
3 4	GENERAL FUND TOTAL	(\$68,407)	(\$370,903)
5 6	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$110,904)	2012-13 (\$585,423)
7 8	FEDERAL EXPENDITURES FUND TOTAL	(\$110,904)	(\$585,423)
9	Medical Care - Payments to Providers 0147		
10 11	Initiative: Reduces funding by eliminating private nonm optional service in the MaineCare program effective July		services as an
12 13 14	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$47,637,039)
15	GENERAL FUND TOTAL	\$0	(\$47,637,039)
16 17 18 19	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL		2012-13 (\$104,043,080) (\$104,043,080)
20 21 22 23	OTHER SPECIAL REVENUE FUNDS All Other OTHER SPECIAL REVENUE FUNDS TOTAL	2011-12 (\$319,609) (\$319,609)	2012-13 (\$5,113,739) (\$5,113,739)
24	Medical Care - Payments to Providers 0147		
25 26	Initiative: Reduces funding by eliminating sexually transservices as an optional service in the MaineCare program.		creening clinic
27 28 29 30	GENERAL FUND All Other GENERAL FUND TOTAL	2011-12 (\$40,397) (\$40,397)	2012-13 (\$217,951) (\$217,951)
		,	/

1 2 3	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$45,771)	2012-13 (\$241,610)
4	FEDERAL EXPENDITURES FUND TOTAL	(\$45,771)	(\$241,610)
5	Medical Care - Payments to Providers 0147		
6 7	Initiative: Reduces funding by eliminating chiropractic the MaineCare program.	services as an optio	nal service in
8 9 10	GENERAL FUND All Other	2011-12 (\$69,199)	2012-13 (\$375,344)
11	GENERAL FUND TOTAL	(\$69,199)	(\$375,344)
12 13 14	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$114,901)	2012-13 (\$606,525)
15	FEDERAL EXPENDITURES FUND TOTAL	(\$114,901)	(\$606,525)
16	Medical Care - Payments to Providers 0147		
17 18	Initiative: Adjusts funding in fiscal year 2011-12 as a Dirigo Health Fund to provide MaineCare seed for the c		
19 20 21	GENERAL FUND All Other	2011-12 (\$10,000,000)	2012-13 \$0
22	GENERAL FUND TOTAL	(\$10,000,000)	\$0
23 24 25	OTHER SPECIAL REVENUE FUNDS All Other	2011-12 \$10,000,000	2012-13 \$0
26	OTHER SPECIAL REVENUE FUNDS TOTAL	\$10,000,000	\$0
27	Medical Care - Payments to Providers 0147		
28 29	Initiative: Reduces funding by reducing reimbursement 109% to 105%.	for critical access h	ospitals from

1 2 3 4	GENERAL FUND All Other GENERAL FUND TOTAL	2011-12 (\$290,834) (\$290,834)	2012-13 (\$1,179,804) (\$1,179,804)
5 6 7 8	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL	2011-12 (\$503,794) (\$503,794)	2012-13 (\$1,987,455) (\$1,987,455)
9 10 11 12	Medical Care - Payments to Providers 0147 Initiative: Reduces funding by reducing the number of p for which reimbursement is allowed from 4 to 2 per determined to be medically necessary.		
13 14 15 16	GENERAL FUND All Other GENERAL FUND TOTAL	2011-12 (\$1,168,120) (\$1,168,120)	2012-13 (\$5,840,598) (\$5,840,598)
17 18 19 20	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL	2011-12 (\$2,023,465) (\$2,023,465)	2012-13 (\$9,838,860) (\$9,838,860)
21 22 23	Medical Care - Payments to Providers 0147 Initiative: Reduces funding by limiting reimbursement tyear.	to 15 outpatient hos	pital visits per
24 25 26 27	GENERAL FUND All Other GENERAL FUND TOTAL	2011-12 (\$277,540) (\$277,540)	2012-13 (\$1,480,214) (\$1,480,214)
28 29 30 31	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL Medical Care - Payments to Providers 0147	2011-12 (\$480,766) (\$480,766)	2012-13 (\$2,493,515) (\$2,493,515)

1 2	Initiative: Reduces funding by limiting reimbursement for hospital admissions to 5 per member per year.		
3 4 5	GENERAL FUND All Other	2011-12 (\$91,890)	2012-13 (\$490,081)
6	GENERAL FUND TOTAL	(\$91,890)	(\$490,081)
7 8 9	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$159,176)	2012-13 (\$825,573)
10	FEDERAL EXPENDITURES FUND TOTAL	(\$159,176)	(\$825,573)
11	Medical Care - Payments to Providers 0147		
12 13	Initiative: Reduces funding by limiting the use of Subdependency to coverage for a 2-year period.	poxone for the treatm	nent of opioid
14 15	GENERAL FUND All Other	2011-12 (\$147,563)	2012-13 \$0
16 17	GENERAL FUND TOTAL	(\$147,563)	\$0
18 19 20	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$1,082,650)	2012-13 \$0
21	FEDERAL EXPENDITURES FUND TOTAL	(\$1,082,650)	\$0
22	Medical Care - Payments to Providers 0147		
23 24	Initiative: Provides funding in the MaineCare and Mai to make cycle payments through the remainder of the 2		ints necessary
25 26 27	GENERAL FUND All Other	2011-12 \$91,805,960	2012-13 \$38,142,642
28	GENERAL FUND TOTAL	\$91,805,960	\$38,142,642

1 2	FEDERAL EXPENDITURES FUND All Other	2011-12 \$207,077,368	2012-13 \$124,626,202
3 4	FEDERAL EXPENDITURES FUND TOTAL	\$207,077,368	\$124,626,202
5	Medical Care - Payments to Providers 0147		
6	Initiative: Reduces funding from the elimination of the	childless adult waiv	er program.
7 8 9	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$22,000,000)
10	GENERAL FUND TOTAL	\$0	(\$22,000,000)
11 12 13	FEDERAL EXPENDITURES FUND All Other	2011-12 \$0	2012-13 (\$37,060,403)
14	FEDERAL EXPENDITURES FUND TOTAL	\$0	(\$37,060,403)
15 16 17	Medical Care - Payments to Providers 0147 Initiative: Adjusts funding for Medicaid services as a medical Assistance Percentage.	result of the decrease	e in the Federal
18 19 20	GENERAL FUND All Other	2011-12 \$0	2012-13 \$6,997,873
21	GENERAL FUND TOTAL	\$0	\$6,997,873
22 23 24 25	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL	2011-12 \$0 \$0	2012-13 (\$10,382,324) (\$10,382,324)
26	Medical Care - Payments to Providers 0147		
27 28	Initiative: Reduces funding by eliminating the rein products.	nbursement for smo	king cessation
29 30 31	GENERAL FUND All Other	2011-12 (\$80,000)	2012-13 (\$430,000)

1	GENERAL FUND TOTAL	(\$80,000)	(\$430,000)
2 3 4	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$138,580)	2012-13 (\$724,363)
5	FEDERAL EXPENDITURES FUND TOTAL	(\$138,580)	(\$724,363)
6	Medical Care - Payments to Providers 0147		
7 8	Initiative: Reduces funding for outpatient services at acute July 1, 2012.	care hospitals by	5%, effective
9 10 11	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$3,180,269)
12	GENERAL FUND TOTAL	\$0	(\$3,180,269)
13 14 15 16	FEDERAL EXPENDITURES FUND All Other FEDERAL EXPENDITURES FUND TOTAL	2011-12 \$0 \$0	2012-13 (\$5,357,366) (\$5,357,366)
17	Medical Care - Payments to Providers 0147		
18 19	Initiative: Reduces funding by reducing optional cov behaviorally challenged and who are in a residential setting	-	lren who are
20 21 22	FEDERAL EXPENDITURES FUND All Other	2011-12 \$0	2012-13 (\$842,282)
23	FEDERAL EXPENDITURES FUND TOTAL	\$0	(\$842,282)
24	Medical Care - Payments to Providers 0147		
25 26	Initiative: Reduces funding to reflect savings from payment Services Waiver - MaineCare program.	t reform in the I	Developmental
27 28 29	FEDERAL EXPENDITURES FUND All Other	2011-12 \$0	2012-13 (\$5,053,691)
30	FEDERAL EXPENDITURES FUND TOTAL	\$0	(\$5,053,691)

1	Medical Care - Payments to Providers 0147		
2 3	Initiative: Reduces funding by reducing reimbursement for hospital inpatient services by 10%.		
4	GENERAL FUND	2011-12	2012-13
5 6	All Other	(\$768,208)	(\$3,127,406)
7	GENERAL FUND TOTAL	(\$768,208)	(\$3,127,406)
8	FEDERAL EXPENDITURES FUND	2011-12	2012-13
9	All Other	(\$2,098,929)	(\$5,268,314)
10 11	FEDERAL EXPENDITURES FUND TOTAL	(\$2,098,929)	(\$5,268,314)
12	Medical Care - Payments to Providers 0147		
13 14 15 16	Initiative: Notwithstanding any provision of law, adjust the Medical Care - Payments to Providers program at Medical Care program to reflect a redistribution of fun- Maine.	nd reducing funding	g in the FHM -
17	GENERAL FUND	2011-12	2012-13
18	All Other	(\$1,003,844)	(\$25,031,096)
19 20	GENERAL FUND TOTAL	(\$1,003,844)	(\$25,031,096)
21	MR/Elderly PNMI Room and Board Z009		
22 23	Initiative: Reduces funding by eliminating adult family MaineCare program.	y care as an optiona	ll service in the
24	GENERAL FUND	2011-12	2012-13
25	All Other	(\$22,609)	(\$121,918)
26 27	GENERAL FUND TOTAL	(\$22,609)	(\$121,918)
28	MR/Elderly PNMI Room and Board Z009		
29 30	Initiative: Reduces funding by eliminating occupationa the MaineCare program.	al therapy as an opt	ional service in

1 2	GENERAL FUND All Other	2011-12 (\$4,088)	2012-13 (\$22,141)
3 4	GENERAL FUND TOTAL	(\$4,088)	(\$22,141)
5	MR/Elderly PNMI Room and Board Zo	009	
6 7	Initiative: Reduces funding by eliminatin MaineCare program.	g physical therapy as an optiona	l service in the
8 9	GENERAL FUND All Other	2011-12 (\$4,890)	2012-13 (\$26,490)
10 11	GENERAL FUND TOTAL	(\$4,890)	(\$26,490)
12	MR/Elderly PNMI Room and Board Zo	009	
13 14	Initiative: Reduces funding by elimina program for individuals in the medically r		the MaineCare
15 16 17	GENERAL FUND All Other	2011-12 (\$2,533,359)	2012-13 (\$13,511,247)
18	GENERAL FUND TOTAL	(\$2,533,359)	(\$13,511,247)
19	MR/Elderly PNMI Room and Board Zo	009	
20 21	Initiative: Provides funding in the Mainer to make cycle payments through the rema		
22 23 24	GENERAL FUND All Other	2011-12 \$0	2012-13 \$8,210,778
25	GENERAL FUND TOTAL	\$0	\$8,210,778
26	Nursing Facilities 0148		
27 28	Initiative: Reduces funding by eliminating the MaineCare program.	g occupational therapy as an opti	ional service in
29 30	GENERAL FUND All Other	2011-12 (\$7,516)	2012-13 (\$40,706)
31 32	GENERAL FUND TOTAL	(\$7,516)	(\$40,706)

1 2 3	FEDERAL EXPENDITURES FUND All Other	2011-12 (\$11,088)	2012-13 (\$58,532)
4	FEDERAL EXPENDITURES FUND TOTAL	(\$11,088)	(\$58,532)
5	Nursing Facilities 0148		
6 7	Initiative: Reduces funding by eliminating physical therapy MaineCare program.	as an optional	service in the
8	GENERAL FUND	2011-12	2012-13
9	All Other	(\$9,087)	(\$49,230)
10 11	GENERAL FUND TOTAL	(\$9,087)	(\$49,230)
12	FEDERAL EXPENDITURES FUND	2011-12	2012-13
13	All Other	(\$13,732)	(\$72,488)
14 15	FEDERAL EXPENDITURES FUND TOTAL	(\$13,732)	(\$72,488)
16	Nursing Facilities 0148		
17 18	Initiative: Provides funding in the MaineCare and MaineCare-related accounts necessary to make cycle payments through the remainder of the 2012-2013 biennium.		unts necessary
19	GENERAL FUND	2011-12	2012-13
20	All Other	\$0	\$7,036,142
21 22	GENERAL FUND TOTAL	\$0	\$7,036,142
23	FEDERAL EXPENDITURES FUND	2011-12	2012-13
24	All Other	\$0	\$11,852,830
25 26	FEDERAL EXPENDITURES FUND TOTAL	\$0	\$11,852,830
27	Nursing Facilities 0148		
28 29	Initiative: Adjusts funding for Medicaid services as a result Medical Assistance Percentage.	of the decrease	in the Federal

1 2	GENERAL FUND All Other	2011-12 \$0	2012-13 \$1,538,014
3 4	GENERAL FUND TOTAL	\$0	\$1,538,014
5	FEDERAL EXPENDITURES FUND	2011-12	2012-13
6 7	All Other	\$0	(\$1,538,014)
8	FEDERAL EXPENDITURES FUND TOTAL	\$0	(\$1,538,014)
9	State-funded Foster Care/Adoption Assistance 0139		
10 11	Initiative: Eliminates funding for the supplemental services for children with complex emotional and behavioral needs.		
12 13	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$1,999,984)
14 15	GENERAL FUND TOTAL	\$0	(\$1,999,984)
16	State-funded Foster Care/Adoption Assistance 0139		
17	Initiative: Reduces funding by reducing contracts in the family reunification program.		n program.
18 19 20	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$1,007,112)
21	GENERAL FUND TOTAL	\$0	(\$1,007,112)
22	State-funded Foster Care/Adoption Assistance 0139		
23	Initiative: Reduces funding by reducing contracts in the alternative response program.		
24 25 26	GENERAL FUND All Other	2011-12 \$0	2012-13 (\$1,290,000)
27	GENERAL FUND TOTAL	\$0	(\$1,290,000)
28 29 30 31	HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS) DEPARTMENT TOTALS	2011-12	2012-13

1	GENERAL FUND	\$65,008,940	(\$100,989,688)
2	FEDERAL EXPENDITURES FUND		(\$106,792,941)
3	FUND FOR A HEALTHY MAINE	\$0	· / / /
4 5	OTHER SPECIAL REVENUE FUNDS	\$8,994,064	(\$12,171,248)
6	DEPARTMENT TOTAL - ALL FUNDS	\$263,641,917	(\$224,340,867)
7 8	SECTION TOTALS	2011-12	2012-13
9	GENERAL FUND	\$78,549,750	(\$102,223,049)
10	FEDERAL EXPENDITURES FUND	The state of the s	(\$106,792,941)
11	FUND FOR A HEALTHY MAINE	\$0	(, , , , ,
12	OTHER SPECIAL REVENUE FUNDS		(\$12,910,525)
13 14	FEDERAL BLOCK GRANT FUND	\$0	(\$91,369)
15	SECTION TOTAL - ALL FUNDS	\$277,182,727	(\$226,386,898)
16	PART B		
17	Sec. B-1. 22 MRSA §3173-A, as realloca	ted by PL 1979, c.	127. §145 and
18	amended by PL 2003, c. 689, Pt. B, §6, is repealed.	,	, 0
19	PART C		
20	Sec. C-1. 22 MRSA §3173-C, sub-§7, as amended by PL 2009, c. 415, Pt. A, §12, is further amended to read:		
21		amended by PL 2009	, c. 415, Pt. A,
		er provision of law,	the following
21 22 23	§12, is further amended to read:7. Copayments. Notwithstanding any othe copayments per service per day are imposed and rein	er provision of law,	the following
21 22 23 24	§12, is further amended to read: 7. Copayments. Notwithstanding any othe copayments per service per day are imposed and rein the following levels:	er provision of law,	the following
21 22 23 24 25	§12, is further amended to read:7. Copayments. Notwithstanding any othe copayments per service per day are imposed and rein the following levels:A. Outpatient hospital services, \$3;	er provision of law,	the following
21 22 23 24 25 26	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27 28	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; D. Private duty nursing and personal care services. 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27 28 29	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; D. Private duty nursing and personal care services. E. Ambulance services, \$3; 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27 28 29 30	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; D. Private duty nursing and personal care services. E. Ambulance services, \$3; F. Physical therapy services, \$2; 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27 28 29 30 31	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; D. Private duty nursing and personal care services. E. Ambulance services, \$3; F. Physical therapy services, \$2; G. Occupational therapy services, \$2; 	er provision of law, mbursements are redu	the following
21 22 23 24 25 26 27 28 29 30 31 32	 §12, is further amended to read: 7. Copayments. Notwithstanding any other copayments per service per day are imposed and rein the following levels: A. Outpatient hospital services, \$3; B. Home health services, \$3; C. Durable medical equipment services, \$3; D. Private duty nursing and personal care services. E. Ambulance services, \$3; F. Physical therapy services, \$2; G. Occupational therapy services, \$2; H. Speech therapy services, \$2; 	er provision of law, mbursements are redu	the following

1	K. Chiropractic services, \$2;	
2	L. Laboratory and x-ray services, \$1;	
3	M. Optical services, \$2;	
4	N. Optometric services, \$3;	
5	O. Mental health clinic services, \$2;	
6	P. Substance abuse services, \$2;	
7	Q. Hospital inpatient services, \$3 per patient day;	
8 9	R. Federally qualified health center services, \$3 per patient day, effective July 1, 2004; and	
10	S. Rural health center services, \$3 per patient day.	
11 12 13 14 15 16	The department may adopt rules to adjust the copayments set forth in this subsection. The rules may adjust amounts to ensure that copayments are deemed nominal in amount and may include monthly limits or exclusions per service category. The need to maintain provider participation in the Medicaid program to the extent required by 42 United States Code, Section 1396a(a)(30)(A) or any successor provision of law must be considered in any reduction in reimbursement to providers or imposition of copayments.	
17	PART D	
18 19	Sec. D-1. 22 MRSA §3174-A, as amended by PL 2001, c. 559, Pt. X, §5, is repealed.	
20	Sec. D-2. Effective date. This Part takes effect July 1, 2012.	
21	PART E	
22 23	Sec. E-1. 22 MRSA §3174-F, as amended by PL 1997, c. 159, §§1 and 2 and PL 2003, c. 689, Pt. B, §6, is repealed.	
24	PART F	
25 26	Sec. F-1. 22 MRSA §3174-G, sub-§1, ¶D, as repealed and replaced by PL 2007 c. 695, Pt. C, §10, is amended to read:	
27 28 29 30 31 32 33 34	D. A child one year of age or older and under 19 years of age when the child's family income is equal to or below 200% of the nonfarm income official poverty line, except that the department may adopt a rule that provides that children described in this paragraph in families with income over 150% and equal to or below 200% of the nonfarm income official poverty line who meet the eligibility requirements of the Cub Care program established under section 3174-T are eligible to participate in the Cub Care program instead of Medicaid. Rules adopted pursuant to this paragraph are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A; and	
35 36	Sec. F-2. 22 MRSA §3174-G, sub-§1, ¶¶ E and F, as amended by PL 2011, c 380, Pt. KK, §2, are repealed.	

1	PART G
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- Sec. G-1. 22 MRSA §254-D, as amended by PL 2007, c. 240, Pt. RR, §1, is repealed.
- Sec. G-2. 22 MRSA §258, sub-§1, ¶A, as amended by PL 2005, c. 401, Pt. C, §2, is repealed.
 - **Sec. G-3. 22 MRSA §258, sub-§§3 to 5,** as enacted by PL 2001, c. 293, §5, are amended to read:
 - **3. Administration; components.** The department shall administer the prescription program. The elderly low cost drug program is a component of the prescription program.
 - **4. Benefit eligibility.** Benefits are subject to the following provisions.
 - A. An individual enrolled in both the elderly low-cost drug program and the prescription program is eligible for the more generous discount authorized under either program in the event overlapping benefits exist.
 - B. If a drug rebate is paid for any prescription under the prescription program, a rebate is not due under the elderly low cost drug program.
 - C. The department shall issue a single certificate for eligibility to an individual who is eligible for both the benefit under the elderly low cost drug program and the benefit under the prescription program.
 - **5. Copayments.** Notwithstanding section 3173-C, a beneficiary of the prescription program shall make the copayments authorized under the prescription program and the elderly low-cost drug program.
 - **Sec. G-4. 22 MRSA §1711-E, sub-§4,** ¶**C,** as enacted by PL 2007, c. 460, §1, is amended to read:
 - C. The department shall assess an annual fee payable by October 1st each year beginning in 2007 on manufacturers of prescription drugs whose drugs are dispensed to members of the MaineCare program under chapter 855 and enrollees in the elderly low cost drug program under section 254 D. Eighty percent of the fees collected under this paragraph must be deposited in a separate account that does not lapse at the end of the fiscal year and must be used to cover the costs of the Maine Health Data Organization pursuant to paragraph A and section 8713. Twenty percent of the assessments must be retained by the department.
 - **Sec. G-5. 22 MRSA §2681, sub-§3,** as amended by PL 2005, c. 401, Pt. C, §3, is further amended to read:
 - **3. Rebate agreement.** A drug manufacturer or labeler that sells prescription drugs in this State through the elderly low cost drug program under section 254-D or any other publicly supported pharmaceutical assistance program shall enter into a rebate agreement with the department for this program. The rebate agreement must require the

manufacturer or labeler to make rebate payments to the State each calendar quarter or according to a schedule established by the department.

- **Sec. G-6. 22 MRSA §2681, sub-§9,** as amended by PL 2005, c. 401, Pt. C, §4, is further amended to read:
- **9. Dedicated fund.** The Maine Rx Plus Dedicated Fund, referred to in this section as the "fund," is established to receive revenue from manufacturers and labelers who pay rebates as provided in subsection 4 and any appropriations or allocations designated for the fund. The purposes of the fund are to reimburse retail pharmacies for discounted prices provided to qualified residents pursuant to subsection 5; and to reimburse the department for contracted services including pharmacy claims processing fees, administrative and associated computer costs and other reasonable program costs; and to benefit the elderly low cost drug program under section 254-D. The fund is a nonlapsing dedicated fund. Interest on fund balances accrues to the fund. Surplus funds in the fund must be used for the benefit of the program. Notwithstanding Title 5, section 1585, surplus funds may also be transferred to the elderly low cost drug program established under section 254-D.
- **Sec. G-7. 22 MRSA §2685, sub-§2,** ¶**E,** as enacted by PL 2007, c. 327, §1, is repealed.
- **Sec. G-8. 22 MRSA §2685, sub-§4,** as enacted by PL 2007, c. 327, §1, is amended to read:
 - **4. Program coverage.** The program must provide outreach and education to prescribers and dispensers who participate in, contract with or are reimbursed by state-funded health care programs, including but not limited to the MaineCare program, the Maine Rx Plus Program, Dirigo Health insurance, the elderly low cost drug program and the state employee health insurance program. The program may provide outreach and education to carriers, health plans, hospitals, employers and other persons interested in the program on a subscription or fee-paying basis under rules adopted by the department.
 - **Sec. G-9. 22 MRSA §2685, sub-§5,** as amended by PL 2011, c. 461, §2, is further amended to read:
 - **5. Funding.** The program may be funded from the General Fund, from federal funds and from other special revenue funds. 'Beginning April 1, 2012 each manufacturer of prescription drugs that are provided to Maine residents through the MaineCare program or the elderly low cost drug program shall pay a fee of \$500 per calendar year to the department to provide funding for the program. The program may accept funds from nongovernmental health access foundations, the Tobacco Manufacturers Act under chapter 263, subchapter 3, undesignated funds associated with pharmaceutical marketing and pricing practices acquired through litigation or action of the Office of the Attorney General and fees from subscriptions, contracts and agreements with private payors as established by rule. Savings achieved as a result of the program may be retained for operation of the program or paid into the General Fund, at the option of the department.

- Sec. G-10. 22 MRSA §3174-G, sub-§1-B, as amended by PL 2005, c. 401, Pt. C, §5, is repealed.
- **Sec. G-11. 22 MRSA §3174-G, sub-§1-C,** as amended by PL 2005, c. 401, Pt. C, §6, is repealed.
- **Sec. G-12. 22 MRSA §3174-G, sub-§2,** as enacted by PL 1989, c. 502, Pt. A, §72 and amended by PL 1997, c. 530, Pt. A, §34, is repealed.
- **Sec. G-13. 22 MRSA §3174-G, sub-§3,** as enacted by PL 1989, c. 502, Pt. A, §72, is repealed.
- **Sec. G-14. 22 MRSA §3174-KK, sub-§3,** as amended by PL 2005, c. 683, Pt. A, §35, is further amended to read:
 - **3. Fund purposes.** Allocations from the fund must prevent any loss of services or increased cost of services to a MaineCare member or a person receiving benefits under the elderly low cost drug program under section 254-D that would otherwise result from insufficient General Fund appropriations, insufficient federal matching funds or any other shortage of funds, changes in federal or state law, rule or policy or the implementation of the federal Medicare Prescription Drug, Improvement, and Modernization Act of 2003.
 - **Sec. G-15. 24-A MRSA §4317, sub-§3,** as amended by PL 2011, c. 443, §5, is further amended to read:
 - **3. Exception.** Subsections 1 and 2 do not apply to any medical assistance or public health programs administered by the Department of Health and Human Services, including, but not limited to, the Medicaid program and the elderly low-cost drug program under Title 22, section 254-D.
 - **Sec. G-16. 24-A MRSA §5002-B, sub-§2-A,** as amended by PL 2005, c. 401, Pt. C, §7, is repealed.

25 PART H

- **Sec. H-1. 22 MRSA §3174-Q, sub-§2,** as amended by PL 2009, c. 571, Pt. PPP, §1, is further amended to read:
 - 2. Services covered. Elimination of services covered under the program on August 1, 1996, except when immediately necessary to comply with federal law or to comply with balanced budget provisions described in Title 5, section 1664, subsection 1. The department may not eliminate a service if modification of that service can achieve compliance with federal law unless such elimination is required as a result of balanced budget provisions described in Title 5, section 1664, subsection 1. Any modification may be made only to the extent necessary to achieve compliance with federal law or with balanced budget provisions described in Title 5, section 1664, subsection 1. Any elimination or modification made under this subsection must be done through rulemaking under the Maine Administrative Procedure Act. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

1 2	If the department takes action to eliminate or modify a service under this subsection, it shall provide notice of the rule-making proceedings to members of the Legislature.
3	PART I
4	Sec. I-1. 22 MRSA §3174-FF, as amended by PL 2007, c. 71, §1, is repealed.
5	PART J
6 7	Sec. J-1. 22 MRSA §3174-HH, as enacted by PL 2005, c. 401, Pt. B, §1, is repealed.
8	PART K
9 10	Sec. K-1. 22 MRSA §3174-RR, sub-§1, as reallocated by RR 2011, c. 1, §32, is amended to read:
11 12 13 14	1. Reimbursement. By October 1, 2012, the department shall provide for the reimbursement under the MaineCare program of independent practice dental hygienists practicing as authorized under Title 32, section 1094-I <u>only for members 21 years of age or younger</u> for the following procedures:
15	A. Prophylaxis performed on a person who is 21 years of age or younger;
16 17	B. Topical application of fluoride performed on a person who is 21 years of age or younger ;
18	C. Provision of oral hygiene instructions;
19	D. The application of sealants;
20	E. Temporary fillings; and
21	F. X-rays.
22 23 24	Reimbursement must be provided to independent practice dental hygienists directly or to a federally qualified health center pursuant to section 3174-V when an independent practice dental hygienist is employed as a core provider at the center.
25	PART L
26 27 28 29 30 31 32 33 34	Sec. L-1. Emergency rule-making authority; health and human services matters. The Department of Health and Human Services is authorized to adopt emergency rules on or before June 30, 2013 under the Maine Revised Statutes, Title 5, sections 8054 and 8073 in order to implement those provisions of this Act over which the department has subject matter jurisdiction for which specific authority has not been provided in any other part of this Act. Notwithstanding Title 5, section 8054, subsections 1 and 2, the Department of Health and Human Services is not required to find that immediate adoption is necessary to avoid a threat to public health, safety or general welfare.

PART M

Sec. M-1. 22 MRSA §1714-B, as amended by PL 2009, c. 213, Pt. CC, §1, is further amended to read:

§1714-B. Critical access hospital reimbursement

For state fiscal years beginning on or after July 1, 2005 through June 30, 2009, the department shall reimburse licensed critical access hospitals at 117% of MaineCare allowable costs for both inpatient and outpatient services provided to patients covered by the MaineCare program. For state fiscal years beginning on or after July 1, 2009, for each critical access hospital fiscal year up to but not including the hospital fiscal year beginning on or after April 1, 2011, the department shall reimburse licensed critical access hospitals at 109% 105% of MaineCare allowable costs for both inpatient and outpatient services provided to patients covered by the MaineCare program. Of the total allocated from hospital tax revenues under Title 36, chapter 375, \$1,000,000 in state and federal funds must be distributed annually among critical access hospitals for staff enhancement payments. This section is repealed April 1, 2012.

Sec. M-2. 22 MRSA §3174-NN, as enacted by PL 2009, c. 213, Pt. CC, §5, is repealed.

Sec. M-3. 22 MRSA §3174-OO, as enacted by PL 2009, c. 213, Pt. CC, §6, is repealed.

20 PART N

Sec. N-1. 8 MRSA §1036, sub-§2, ¶E, as amended by PL 2011, c. 380, Pt. II, §1, is further amended to read:

E. Ten percent of the net slot machine income must be forwarded by the board to the State Controller to be and except as otherwise provided in this paragraph credited to the Fund for a Healthy Maine established by Title 22, section 1511 and segregated into a separate account under Title 22, section 1511, subsection 11, with the use of funds in the account restricted to the purposes described in Title 22, section 1511, subsection 6, paragraph E. For the fiscal years ending June 30, 2010, June 30, 2011, and June 30, 2012 and June 30, 2013, the amount credited annually by the State Controller to the Fund for a Healthy Maine under this paragraph may not exceed \$4,500,000 annually and any funds in excess of \$4,500,000 annually during these fiscal years must be credited as General Fund undedicated revenue, and, for the fiscal year ending June 30, 2013, the amount credited by the State Controller to the Fund for a Healthy Maine under this paragraph is \$0;

35 PART O

Sec. O-1. Lapse available balance. Notwithstanding any other provision of law, at the close of fiscal year 2011-12, the State Controller shall lapse \$5,000,000 from the Bureau of Medical Services account within the Department of Health and Human Services to the unappropriated surplus of the General Fund.

1	PART P	
2	Sec. P-1. PL 2011, c. 380, Pt. JJJ, §1 is amended to read:	
3 4 5 6 7 8 9	Sec. JJJ-1. Transfer from Other Special Revenue Funds to unappropriated surplus of the General Fund. Notwithstanding any other provisio of law, the State Controller shall transfer \$43,000,000 \$102,000,000 on June 30, 201 from Other Special Revenue Funds to the unappropriated surplus of the General Fund. O July 1, 2012, the State Controller shall transfer \$43,000,000 \$102,000,000 from th General Fund unappropriated surplus to Other Special Revenue Funds as repayment. This transfer is considered an interfund advance.	
10	PART Q	
11 12 13 14 15 16 17	Sec. Q-1. Transfer from unappropriated surplus; Maine Budget Stabilization Fund. Notwithstanding any other provision of law, the State Controller shall transfer \$39,500,000 during fiscal year 2012-13 from the General Fund unappropriated surplus to the Maine Budget Stabilization Fund within the Department of Administrative and Financial Services in order to ensure that funds will be available to fund necessary services through the Department of Health and Human Services for the State's most vulnerable citizens.	
18 19	Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved, except as otherwise indicated.	
20	SUMMARY	
21	PART A	
22	This Part makes appropriations and allocations.	
23	PART B	
24 25 26	This Part repeals the requirement that MaineCare cover optional services under the MaineCare program for adults for physical and occupational therapy services provided to residents of intermediate care or skilled nursing facilities.	
27	PART C	
28 29 30 31 32	This Part repeals provisions requiring copayments from MaineCare members for physical therapy services, occupational therapy services, speech therapy services, podiatry services, chiropractic services, optical services and optometric services. These services are proposed for elimination from the MaineCare program subject to federal guidelines and approval.	
33	PART D	

2 3	This Part repeals the requirement that the Department of Health and Human Services administer a program of medical coverage for persons residing in cost reimbursement boarding homes effective July 1, 2012.	
4	PART E	
5 6	This Part repeals the requirement that the MaineCare program provide coverage for adult dental services as a service to Medicaid-eligible people.	
7	PART F	
8	This Part does the following.	
9 10 11 12 13	1. It reduces eligibility for Medicaid services of a parent or caretaker relative of an eligible child from a maximum income of 200% of the nonfarm income official poverty line to the minimum federal requirement of no less than standard of need for Aid to Families with Dependent Children as of 1996, which is approximately 51% of the nonfarm income official poverty line.	
14	2. It eliminates medical coverage for childless adults from 20 to 64 years of age.	
15	PART G	
16	This Part does the following.	
17	1. It repeals the elderly low-cost drug program.	
18 19 20	2. It repeals the requirement that the Department of Health and Human Services apply for a federal waiver to use federal matching dollars to enhance the elderly low-cost drug program.	
21 22	3. It repeals the restriction on the use of a resource test by the Department of Health and Human Services for children and pregnant women eligible for Medicaid coverage.	
23	PART H	
24 25 26	This Part authorizes the Department of Health and Human Services to make changes to MaineCare service provisions if necessary to comply with state balanced budget provisions.	
27	PART I	
28	This Part repeals the MaineCare Basic program.	
29	PART J	
30 31 32	This Part repeals the provision authorizing the Department of Health and Human Services to provide prescription drug services for MaineCare members through the elderly low-cost drug program.	
33	PART K	

1 This Part eliminates the requirement that the MaineCare program cover optional 2 dental services provided by independent practice dental hygienists to persons who are older than 21 years of age. 3 4 PART L 5 This Part gives the Department of Health and Human Services the authority to adopt emergency rules to implement any provisions of this legislation over which it has specific 6 7 authority that has not been addressed by some other part of this legislation. 8 **PART M** 9 This Part does the following. 10 1. It reduces the reimbursement rate for critical access hospitals from 109% to 105% of MaineCare allowable costs and strikes the provision that repeals, effective April 1, 11 2012, the section that establishes this reimbursement rate. 12 13 2. It repeals the provision that requires the Department of Health and Human 14 Services to phase in a system to reimburse critical access hospitals for inpatient services under the MaineCare program based on diagnosis-related groupings. 15 3. It repeals the provision that requires the Department of Health and Human 16 Services to phase in a system to reimburse critical access hospitals for outpatient services 17 under the MaineCare program based on ambulatory payment classifications. 18 19 **PART N** 20 This Part eliminates the transfer of up to \$4,500,000 of slot machine income to the 21 Fund for a Healthy Maine for the fiscal year ending June 30, 2013. 22 **PART O** 23 This Part lapses \$5,000,000 from the Bureau of Medical Services account within the 24 Department of Health and Human Services to the unappropriated surplus of the General Fund at the end of fiscal year 2011-12. 25 26 **PART P** 27 This Part increases the interfund advance from Other Special Revenue Funds to the General Fund unappropriated surplus required for one day at the end of fiscal year 2011-28 12 from \$43,000,000 to \$102,000,000. 29 30 **PART Q** 31 This Part transfers \$39,500,000 from the General Fund unappropriated surplus to the Maine Budget Stabilization Fund during fiscal year 2012-13 in order to ensure funds will 32 33 be available to fund services through the Department of Health and Human Services for the State's most vulnerable citizens. 34