

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

Amend the bill by striking out the title and substituting the following:

**'An Act To Alter MaineCare Copayments as Allowed
by the Federal Deficit Reduction Act of 2005'**

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

'Sec. 1. 22 MRSA §3173-C, sub-§7, ¶R, as amended by PL 2003, c. 451, Pt. H, §1 and affected by §3, is further amended to read:

R. Federally qualified health center services, \$3 per patient day, effective July 1, 2004; and

Sec. 2. 22 MRSA §3173-C, sub-§7, ¶S, as enacted by PL 2003, c. 20, Pt. K, §8, is amended to read:

S. Rural health center services, \$3 per patient day; and

Sec. 3. 22 MRSA §3173-C, sub-§7, ¶T is enacted to read:

T. Physician services, \$10 for MaineCare members who qualify for the program under section 3174-G, subsection 1, paragraph E when the family income is equal to or above 150% of the nonfarm income official poverty line.

Sec. 4. 22 MRSA §3173-C, sub-§8 is enacted to read:

8. Mandatory copayments. Except as prohibited or limited by federal law, beginning July 1, 2010, copayments for MaineCare members who qualify for the program under section 3174-G, subsection 1, paragraph E when the family income is equal to or above 150% of the nonfarm income official poverty line for prescription drug services under subsection 2 and for physician services under subsection 7, paragraph T are mandatory and a provider of services may refuse to provide services if the member does not pay the copayment. The department shall adopt rules to implement this subsection. Rules adopted pursuant to this subsection are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A.

Sec. 5. Appropriations and allocations. The following appropriations and allocations are made.

HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS)

Bureau of Medical Services 0129

Initiative: Appropriates and allocates funds for the costs of implementing mandatory MaineCare copayments for physician and pharmacy services.

GENERAL FUND

2009-10

2010-11

| | | |
|--------------------|----------------|------------|
| All Other | \$1,161 | \$0 |
| GENERAL FUND TOTAL | <u>\$1,161</u> | <u>\$0</u> |

| | | |
|----------------------------------|-----------------|----------------|
| FEDERAL EXPENDITURES FUND | 2009-10 | 2010-11 |
| All Other | \$10,449 | \$0 |
| FEDERAL EXPENDITURES FUND TOTAL | <u>\$10,449</u> | <u>\$0</u> |

Medical Care - Payments to Providers 0147

Initiative: Reduces funding to reflect the reduction in spending resulting from requiring mandatory MaineCare copayments for physician and pharmacy services.

| | | |
|---------------------|----------------|--------------------|
| GENERAL FUND | 2009-10 | 2010-11 |
| All Other | \$0 | (\$128,805) |
| GENERAL FUND TOTAL | <u>\$0</u> | <u>(\$128,805)</u> |

| | | |
|----------------------------------|----------------|--------------------|
| FEDERAL EXPENDITURES FUND | 2009-10 | 2010-11 |
| All Other | \$0 | (\$239,105) |
| FEDERAL EXPENDITURES FUND TOTAL | <u>\$0</u> | <u>(\$239,105)</u> |

| | | |
|--|-----------------|--------------------|
| HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY DHS) | | |
| DEPARTMENT TOTALS | 2009-10 | 2010-11 |
| GENERAL FUND | \$1,161 | (\$128,805) |
| FEDERAL EXPENDITURES FUND | \$10,449 | (\$239,105) |
| DEPARTMENT TOTAL - ALL FUNDS | <u>\$11,610</u> | <u>(\$367,910)</u> |

Sec. 6. Effective date. This Act takes effect July 1, 2010.'

SUMMARY

This amendment replaces the bill and is the minority report of the committee. Beginning July 1, 2010 the amendment imposes in the MaineCare program a copayment of \$10 for physician services and authorizes providers of physician and prescription drug services to deny the service to a member who

does not pay who is a nonexempt adult eligible under the Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraph E when the family income is equal to or above 150% of the nonfarm income official poverty line. This amendment directs the Department of Health and Human Services to adopt routine technical rules to implement the mandatory copayments and the \$10 copayment for physician services. The amendment adds an appropriations and allocations section. The amendment provides an effective date of July 1, 2010.

FISCAL NOTE REQUIRED
(See attached)