

FY 2014-2015 Biennial Budget (LR 1046) - HHS Committee Programs - Proposed Budget Initiatives - Tabled 4/17/2013

Line #	Hear #	Prog. Code	Program	Initiative Number	Initiative Text	Initiative Justification	Initiative Notes	Sort Class.	Fund Code	Fund	Unit	HHS Vote	Personal Services FY14	Personal Services FY15	All Other FY14	All Other FY15	Capital Expend. FY14	Leg. Count FY14	Leg. Count FY15
11	HHS-49	105	Riverview Psychiatric Center	C-A-7004	Eliminates one part-time Physician III position and one Customer Representative Associate II Human Services position and associated All Other funding as a result of closing the dental clinic operated in Portland by Riverview Psychiatric Center.	This initiative eliminates the Portland Dental Clinic operated by the Riverview Psychiatric Center. The Portland Dental Clinic provides routine dental and conscious sedation dentistry to a variety of clients.		Adult MH	10	General Fund	50	T	\$0	\$0	(\$33,563)	(\$33,563)	\$0	0.000	0.000
12	HHS-49	105	Riverview Psychiatric Center	C-A-7004	Eliminates one part-time Physician III position and one Customer Representative Associate II Human Services position and associated All Other funding as a result of closing the dental clinic operated in Portland by Riverview Psychiatric Center.	This initiative eliminates the Portland Dental Clinic operated by the Riverview Psychiatric Center. The Portland Dental Clinic provides routine dental and conscious sedation dentistry to a variety of clients.		Adult MH	14	Other Special Revenue Funds	20	T	(\$120,309)	(\$123,793)	(\$323,674)	(\$323,674)	\$0	(2.000)	(2.000)
13	HHS-49	105	Riverview Psychiatric Center	C-A-7004	Eliminates one part-time Physician III position and one Customer Representative Associate II Human Services position and associated All Other funding as a result of closing the dental clinic operated in Portland by Riverview Psychiatric Center.	This initiative eliminates the Portland Dental Clinic operated by the Riverview Psychiatric Center. The Portland Dental Clinic provides routine dental and conscious sedation dentistry to a variety of clients.		Adult MH	14	Other Special Revenue Funds	22	T	\$0	\$0	(\$170,105)	(\$170,105)	\$0	0.000	0.000
14	HHS-18	733	Disproportionate Share - Riverview Psychiatric Center	C-A-7004	Eliminates one part-time Physician III position and one Customer Representative Associate II Human Services position and associated All Other funding as a result of closing the dental clinic operated in Portland by Riverview Psychiatric Center.	This initiative eliminates the Portland Dental Clinic operated by the Riverview Psychiatric Center. The Portland Dental Clinic provides routine dental and conscious sedation dentistry to a variety of clients.		Adult MH	10	General Fund	10	T	(\$74,337)	(\$77,332)	(\$75,412)	(\$75,412)	\$0	0.000	0.000

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35	HHS-	167	139	State-funded Foster Care/Adoption Assistance	C-A-1508	Provides funding in the State Funded Foster Care/Adoption Assistance program for the projected increase in the number of children entering foster care.	There is a projected increase in the number of children entering foster care from 1513 in FY 2012 to 1911 in 2013 and a projected increase in the number of children receiving adoption assistance, from 3479 in FY 2012 to 3566 in FY 2013. Increases totaling \$3 to \$4 million for room and board expenses and an additional million to childcare, clothing expense, diaper or similar expenses through the FY14/15 biennium for those new entries into foster care.		Children Services	10	General Fund	1	T	\$0	\$0	\$4,200,000	\$4,200,000	\$0	0.000	0.000
45	HHS-	167	139	State-funded Foster Care/Adoption Assistance	C-A-7007	Transfers funding from the Mental Health Services - Child Medicaid program to the State-funded Foster Care/Adoption Assistance program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the State-funded Foster Care/Adoption Assistance program to be used to provide family support services to those involved with the child welfare system.	Are federal funds involved and if so, why the state-funded program?	Children Services	10	General Fund	1	T	\$0	\$0	\$2,000,000	\$2,000,000	\$0	0.000	0.000
46	HHS-	128	147	Medical Care - Payments to Providers	C-A-7007	Transfers funding from the Mental Health Services - Child Medicaid program to the State-funded Foster Care/Adoption Assistance program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the State-funded Foster Care/Adoption Assistance program to be used to provide family support services to those involved with the child welfare system.	State Funded account?	Children Services	13	Federal Expend. Fund	1	T	\$0	\$0	(\$3,236,973)	(\$3,201,560)	\$0	0.000	0.000
47	HHS-	31	731	Mental Health Services - Child Medicaid	C-A-7007	Transfers funding from the Mental Health Services - Child Medicaid program to the State-funded Foster Care/Adoption Assistance program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the State-funded Foster Care/Adoption Assistance program to be used to provide family support services to those involved with the child welfare system.	State Funded account?	Children Services	10	General Fund	17	T	\$0	\$0	(\$2,000,000)	(\$2,000,000)	\$0	0.000	0.000
48	HHS-	31	731	Mental Health Services - Child Medicaid	C-A-7008	Transfers funding from the Mental Health Services - Child Medicaid program to the Mental Health Services - Community Medicaid program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the Mental Health Services - Community Medicaid program to be used to provide family support services to those involved with the child welfare system.		Children Services	10	General Fund	17	T	\$0	\$0	(\$1,000,000)	(\$1,000,000)	\$0	0.000	0.000

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49	HHS-	38	732	Mental Health Services - Community Medicaid	C-A-7008	Transfers funding from the Mental Health Services - Child Medicaid program to the Mental Health Services - Community Medicaid program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the Mental Health Services - Community Medicaid program to be used to provide family support services to those involved with the child welfare system.	Children Services	10	General Fund	14	T	\$0	\$0	\$1,000,000	\$1,000,000	\$0	0.000	0.000
50	HHS-	31	731	Mental Health Services - Child Medicaid	C-A-7009	Transfers funding from the Mental Health Services - Child Medicaid program to the Office of Substance Abuse - Medicaid Seed program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the Office of Substance Abuse - Medicaid Seed program to be used to substance abuse services to children, adults and families.	Children Services	10	General Fund	17	T	\$0	\$0	(\$1,000,000)	(\$1,000,000)	\$0	0.000	0.000
51	HHS-	45	844	Office of Substance Abuse - Medicaid Seed	C-A-7009	Transfers funding from the Mental Health Services - Child Medicaid program to the Office of Substance Abuse - Medicaid Seed program.	The infant mental health program is being eliminated as of July 1, 2013. Savings resulting from the elimination are being transferred to the Office of Substance Abuse - Medicaid Seed program to be used to substance abuse services to children, adults and families.	Children Services	10	General Fund	1	T	\$0	\$0	\$1,000,000	\$1,000,000	\$0	0.000	0.000
84	HHS-	124	147	Medical Care - Payments to Providers	C-A-1575	Provides funding in the Medicaid Waiver for Other Related Conditions program for supportive services.	Establishes funding for a new Medicaid Waiver for Other Related Conditions (ORC) which includes cerebral palsy, seizure disorders, etc. This waiver will support 75 individuals over a 5 year timeframe (15 - year one, 10 - each year thereafter) at a cost of \$465/day. This waiver will meet the requirements set by Federal Court Settlement-Van Meter v. DHHS Commissioner.	Develop. Services	13	Federal Expend. Fund	1	T	\$0	\$0	\$2,451,316	\$3,357,236	\$0	0.000	0.000
85	HHS-	30	Z159	Medicaid Waiver for Other Related Conditions	C-A-1575	Provides funding in the Medicaid Waiver for Other Related Conditions program for supportive services.	Establishes funding for a new Medicaid Waiver for Other Related Conditions (ORC) which includes cerebral palsy, seizure disorders, etc. This waiver will support 75 individuals over a 5 year timeframe (15 - year one, 10 - each year thereafter) at a cost of \$465/day. This waiver will meet the requirements set by Federal Court Settlement-Van Meter v. DHHS Commissioner.	Develop. Services	10	General Fund	1	T	\$0	\$0	\$1,514,573	\$2,097,250	\$0	0.000	0.000

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88	HHS-	14	987 Developmental Services Waiver - MaineCare	C-A-7006	Reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29.	This initiative reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29 effective January 1, 2014.		Develop. Services	10	General Fund	16	T	\$0	\$0	(\$595,439)	(\$1,361,005)	\$0	0.000	0.000
89	HHS-	16	Z006 Developmental Services Waiver - Supports	C-A-7006	Reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29.	This initiative reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29 effective January 1, 2014.		Develop. Services	10	General Fund	1	T	\$0	\$0	(\$10,952)	(\$25,034)	\$0	0.000	0.000
90	HHS-	130	147 Medical Care - Payments to Providers	C-A-7012	Reduces funding by eliminating reimbursement for the medical-add on in the MaineCare Benefits Manual, Chapters II and II, Section 21 and Section 29.	This initiative reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29 effective January 1, 2014.		Develop. Services	10	General Fund	1	T	\$0	\$0	(\$30,374)	(\$69,426)	\$0	0.000	0.000
91	HHS-	130	147 Medical Care - Payments to Providers	C-A-7012	Reduces funding by eliminating reimbursement for the medical-add on in the MaineCare Benefits Manual, Chapters II and II, Section 21 and Section 29.	This initiative reduces funding by eliminating reimbursement for the medical add-on in the MaineCare Benefits Manual, Chapters II and III, Section 21 and Section 29 effective January 1, 2014.		Develop. Services	13	Federal Expend. Fund	1	T	\$0	\$0	(\$1,045,000)	(\$2,329,878)	\$0	0.000	0.000

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154	HHS-	102	143 Health - Bureau of	C-A-7000	Transfers one Secretary Specialist position assigned to the tobacco enforcement program from the Office of the Attorney General, Human Services Division program to the Department of Health and Human Services, Health - Bureau of program.	The Tobacco Enforcement Program provides critical support for both state and federal enforcement of laws and enables compliance with statutory obligations as well as Synar requirements. The Tobacco Enforcement Program is currently managed in the Attorney General's Office with one position funded by Maine Center for Disease Control through a contract with the federal Food and Drug Administration (FDA). Oversight of the Tobacco Enforcement Program will be transferred to the Department of Health and Human Services, Maine Center for Disease Control.		DHHS Mgt.	14	Other Special Revenue Funds	3	T	\$74,322	\$76,507	(\$66,353)	(\$68,641)	\$0	1.000	1.000
200	FHM-	12	950 FHM - Health Education Centers	C-A-1	Provides additional funding for the University of New England administered medical recruitment centers that address health professional work shortages in Maine's rural and underserved area.	This initiative will provide funding to allow the centers to continue operation.		FHM	24	Fund for a Healthy Maine	2	T	\$0	\$0	\$4,647	\$9,647	\$0	0.000	0.000
202	HHS-	133	147 Medical Care - Payments to Providers	C-A-7023	Notwithstanding any other provisions of law, adjusts funding by increasing funding in the FHM - Medical Care program and decreasing funding in the Medical Care - Payments to Providers program to reflect a redistribution of funding within the Fund for a Healthy Maine.	This proposal allocates additional resources in the Fund for a Healthy Maine to the FHM - Medical Care Services program and as a result will reduce funding requirements in the related General Fund account.	Don't see the deapprop for GF	FHM	24	Fund for a Healthy Maine	1	T	\$0	\$0	\$3,000,000	\$2,400,000	\$0	0.000	0.000
237	FHM-	26	921 Fund for a Healthy Maine		Caps the transfer to FHM from Hollywood Casino at \$4.5m each year of the biennium.	No justification provided.	Is not reflected on BoB's fiscal note but does show up in BFMS. FY 14 \$446,587, FY 15 \$501,109	FHM	10	General Fund	1	T	\$0	\$0	\$0	\$0	\$0	0.000	0.000
238	FHM-	26	921 Fund for a Healthy Maine		Caps the transfer to FHM from Hollywood Casino at \$4.5m each year of the biennium.	No justification provided.	Is not reflected on BoB's fiscal note but does show up in BFMS. FY 14 \$446,587, FY 15 \$501,109	FHM	11	Fund for a Healthy Maine	1	T	\$0	\$0	\$0	\$0	\$0	0.000	0.000

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285	HHS-	134	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding to reflect the dissolution of the Dirigo Health program.	No justification provided.	MaineCare Baseline Adjust.	14	Other Special Revenue Funds	3	T	\$0	\$0	\$0	(\$9,614,390)	\$0	0.000	0.000
286	HHS-	125	147	Medical Care - Payments to Providers	C-A-1579	Provides funding in MaineCare and MaineCare-related accounts to make cycle payments and payments to providers to reflect increased health care costs.	Adjusts the baseline and provides funding in various MaineCare accounts due to increased program growth and utilization.	MaineCare Cycle Payments	10	General Fund	1	T	\$0	\$0	\$103,512,230	\$130,613,201	\$0	0.000	0.000
287	HHS-	125	147	Medical Care - Payments to Providers	C-A-1579	Provides funding in MaineCare and MaineCare-related accounts to make cycle payments and payments to providers to reflect increased health care costs.	Adjusts the baseline and provides funding in various MaineCare accounts due to increased program growth and utilization.	MaineCare Cycle Payments	13	Federal Expend. Fund	1	T	\$0	\$0	\$168,142,350	\$212,020,842	\$0	0.000	0.000
288	HHS-	113	202	Low-cost Drugs To Maine's Elderly	C-A-1579	Provides funding in MaineCare and MaineCare-related accounts to make cycle payments and payments to providers to reflect increased health care costs.	Adjusts the baseline and provides funding in various MaineCare accounts due to increased program growth and utilization.	MaineCare Cycle Payments	10	General Fund	1	T	\$0	\$0	\$112,154	\$112,154	\$0	0.000	0.000
291	HHS-	156	Z009	PNMI Room and Board	C-A-7002	Reduces funding by eliminating state-funded medical coverage for individuals who are meeting a deductible necessary to become MaineCare eligible and who reside in private non-medical institutions.	This initiative reduces funding by eliminating state-funded medical coverage for individuals who are meeting a deductible necessary to become MaineCare eligible and who reside in private nonmedical institutions. The state is paying 100 percent of their services (less cost of care) while the individual is meeting their deductible. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$386,000)	(\$386,000)	\$0	0.000	0.000

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292	HHS-	126	147	Medical Care - Payments to Providers	C-A-7004	Reduces funding through the elimination of the elderly low-cost drug program.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.		MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$3,064,775)	(\$3,064,775)	\$0	0.000	0.000
293	HHS-	126	147	Medical Care - Payments to Providers	C-A-7004	Reduces funding through the elimination of the elderly low-cost drug program.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.		MaineCare Eligibility/Recipients	13	Federal Expend. Fund	1	T	\$0	\$0	(\$4,960,297)	(\$4,906,031)	\$0	0.000	0.000
294	HHS-	113	202	Low-cost Drugs To Maine's Elderly	C-A-7004	Reduces funding through the elimination of the elderly low-cost drug program.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	No FHM-DEL initiative?	MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$3,943,651)	(\$3,943,651)	\$0	0.000	0.000
295	HHS-	128	147	Medical Care - Payments to Providers	C-A-7009	Reduces funding by eliminating the ineligible spouse disregard.	This initiative eliminates the ineligible spouse disregard effective January 1, 2014.		MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$190,977)	(\$436,519)	\$0	0.000	0.000
296	HHS-	128	147	Medical Care - Payments to Providers	C-A-7009	Reduces funding by eliminating the ineligible spouse disregard.	This initiative eliminates the ineligible spouse disregard effective January 1, 2014.		MaineCare Eligibility/Recipients	13	Federal Expend. Fund	1	T	\$0	\$0	(\$309,094)	(\$698,771)	\$0	0.000	0.000

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297	HHS-	138	148	Nursing Facilities	C-A-7009	Reduces funding by eliminating the ineligible spouse disregard.	This initiative eliminates the ineligible spouse disregard effective January 1, 2014.	MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$17,331)	(\$39,614)	\$0	0.000	0.000
298	HHS-	138	148	Nursing Facilities	C-A-7009	Reduces funding by eliminating the ineligible spouse disregard.	This initiative eliminates the ineligible spouse disregard effective January 1, 2014.	MaineCare Eligibility/Recipients	13	Federal Expend. Fund	1	T	\$0	\$0	(\$28,049)	(\$63,413)	\$0	0.000	0.000
299	HHS-	129	147	Medical Care - Payments to Providers	C-A-7010	Reduces funding by eliminating crossover payments related to the roll-back of the Medicare Savings Program to the federal minimum.	This initiative would eliminate the crossover payments related to the roll-back of the limits for the Medicare Savings Program to 100% FPL for Qualified Medicare Beneficiaries, 120% FPL for Specified Low-income Medicare Beneficiaries and 135% FPL for Qualified individuals. The savings assume an effective date of January 1, 2014.	MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$7,747,035)	(\$8,263,504)	\$0	0.000	0.000
300	HHS-	129	147	Medical Care - Payments to Providers	C-A-7010	Reduces funding by eliminating crossover payments related to the roll-back of the Medicare Savings Program to the federal minimum.	This initiative would eliminate the crossover payments related to the roll-back of the limits for the Medicare Savings Program to 100% FPL for Qualified Medicare Beneficiaries, 120% FPL for Specified Low-income Medicare Beneficiaries and 135% FPL for Qualified individuals. The savings assume an effective date of January 1, 2014.	MaineCare Eligibility/Recipients	13	Federal Expend. Fund	1	T	\$0	\$0	(\$12,538,472)	(\$13,228,053)	\$0	0.000	0.000
301	HHS-	133	147	Medical Care - Payments to Providers	C-A-7022	Reduces funding from rolling back the limits of the Medicare Savings Program to the federal minimum levels as well as reinstating the asset test.	No justification provided.	MaineCare Eligibility/Recipients	10	General Fund	1	T	\$0	\$0	(\$3,935,612)	(\$3,935,612)	\$0	0.000	0.000

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302	HHS-	133	147	Medical Care - Payments to Providers	C-A-7022	Reduces funding from rolling back the limits of the Medicare Savings Program to the federal minimum levels as well as reinstating the asset test.	No justification provided.	MaineCare Eligibility/Recipients	13	Federal Expend. Fund	1	T	\$0	\$0	(\$6,369,735)	(\$6,300,050)	\$0	0.000	0.000
320	HHS-	127	147	Medical Care - Payments to Providers	C-A-7005	Reduces funding by reducing reimbursement to critical access hospitals from 109% to 101% of allowable costs.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Hospitals	10	General Fund	1	T	\$0	\$0	(\$2,448,000)	(\$2,448,000)	\$0	0.000	0.000
321	HHS-	127	147	Medical Care - Payments to Providers	C-A-7005	Reduces funding by reducing reimbursement to critical access hospitals from 109% to 101% of allowable costs.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Hospitals	13	Federal Expend. Fund	1	T	\$0	\$0	(\$3,962,055)	(\$3,918,710)	\$0	0.000	0.000
322	HHS-	127	147	Medical Care - Payments to Providers	C-A-7006	Reduces funding by reducing hospital reimbursement rates for outpatient services by 10% in the MaineCare Benefits Manual, Chapter III, section 45, Hospital Services.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Hospitals	10	General Fund	1	T	\$0	\$0	(\$4,900,000)	(\$4,900,000)	\$0	0.000	0.000
323	HHS-	127	147	Medical Care - Payments to Providers	C-A-7006	Reduces funding by reducing hospital reimbursement rates for outpatient services by 10% in the MaineCare Benefits Manual, Chapter III, section 45, Hospital Services.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Hospitals	13	Federal Expend. Fund	1	T	\$0	\$0	(\$7,930,584)	(\$7,843,823)	\$0	0.000	0.000

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324	HHS-	129	147	Medical Care - Payments to Providers	C-A-7011	Adjusts funding to reflect an update of the hospital tax base year from 2008 to 2011.	No justification provided.	Need to change to gross FY 14 - \$13,322,462; FY 15 -\$18,025,709 to be consistent with Part QQ	MaineCare Hospitals	10	General Fund	1	T	\$0	\$0	(\$13,170,490)	(\$17,869,596)	\$0	0.000	0.000
325	HHS-	129	147	Medical Care - Payments to Providers	C-A-7011	Adjusts funding to reflect an update of the hospital tax base year from 2008 to 2011.	No justification provided.	Need to change to gross FY 14 - \$13,322,462; FY 15 -\$18,025,709 to be consistent with Part QQ	MaineCare Hospitals	14	Other Special Revenue Funds	4	T	\$0	\$0	\$13,170,490	\$17,869,596	\$0	0.000	0.000
326	HHS-	193	147	Medical Care - Payments to Providers	C-A-7011	Increased dedicated revenue from updating of the hospital tax base year from 2008 to 2011.	No justification provided.	Entered gross amount per 2/1/13 DHHS e-mail. FY 14 \$13,322,462, FY 15 \$18,025,709. Match limited by UPL	MaineCare Hospitals	14	Other Special Revenue Funds	4	T	\$0	\$0	\$0	\$0	\$0	0.000	0.000
327	HHS-	132	147	Medical Care - Payments to Providers	C-A-7021	Provides funding to increase hospital reimbursement.	No justification provided.	Related to Part QQ	MaineCare Hospitals	10	General Fund	1	T	\$0	\$0	\$152,000	\$156,000	\$0	0.000	0.000
328	HHS-	132	147	Medical Care - Payments to Providers	C-A-7021	Provides funding to increase hospital reimbursement.	No justification provided.	Related to Part QQ	MaineCare Hospitals	13	Federal Expend. Fund	1	T	\$0	\$0	\$246,114	\$249,722	\$0	0.000	0.000

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335	HHS-	126	147	Medical Care - Payments to Providers	C-A-7003	Reduces funding by limiting reimbursement for services provided to dually-eligible members to licensed clinical social workers.	This initiative will eliminate reimbursements to licensed clinical professional counselors and licensed marriage and family therapists for services provided to dually-eligible members. These services will only be reimbursed when provided by licensed clinical social workers, which aligns with Medicare policy. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Other Providers	10	General Fund	1	T	\$0	\$0	(\$3,300,000)	(\$3,300,000)	\$0	0.000	0.000	
336	HHS-	126	147	Medical Care - Payments to Providers	C-A-7003	Reduces funding by limiting reimbursement for services provided to dually-eligible members to licensed clinical social workers.	This initiative will eliminate reimbursements to licensed clinical professional counselors and licensed marriage and family therapists for services provided to dually-eligible members. These services will only be reimbursed when provided by licensed clinical social workers, which aligns with Medicare policy. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	MaineCare Other Providers	13	Federal Expend. Fund	1	T	\$0	\$0	(\$5,314,005)	(\$5,282,575)	\$0	0.000	0.000	
337	HHS-	130	147	Medical Care - Payments to Providers	C-A-7014	Reduces funding by eliminating therapeutic leave days in the MaineCare Benefits Manual, Chapters II and III, sections 67 and 45.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	Also proposed in LD 250 but revised by AFA	MaineCare Other Providers	10	General Fund	1	T	\$0	\$0	(\$640,000)	(\$640,000)	\$0	0.000	0.000
338	HHS-	130	147	Medical Care - Payments to Providers	C-A-7014	Reduces funding by eliminating therapeutic leave days in the MaineCare Benefits Manual, Chapters II and III, sections 67 and 45.	No justification provided. Also proposed in LD 250, the EFY 2013 Supplemental Budget Bill.	Also proposed in LD 250 but revised by AFA	MaineCare Other Providers	13	Federal Expend. Fund	1	T	\$0	\$0	(\$1,035,831)	(\$1,024,500)	\$0	0.000	0.000
342	HHS-	171	138	Temporary Assistance for Needy Families	C-A-1513	Reduces funding to align allocations with existing resources.	Account over allocated. Collections average \$104,000,000 with operating transfer of \$15,000,000. Transfers do not use allotment.	Public Assistance	14	Other Special Revenue Funds	1	T	\$0	\$0	(\$21,837,764)	(\$21,837,764)	\$0	0.000	0.000	

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Line #	Hear #	Prog. Code	Program	Initiative Number	Initiative Text	Initiative Justification	Initiative Notes	Sort Class.	Fund Code	Fund	Unit	HHS Vote	Personal Services FY14	Personal Services FY15	All Other FY14	All Other FY15	Capital Expend. FY14	Leg. Count FY14	Leg. Count FY15	
343	HHS-	165	131 State Supplement to Federal Supplemental Security Income	C-A-7008	Reduces funding by eliminating state supplemental benefits for legal non-citizens.	This initiative will eliminate monthly cash payments to 82 legal non-citizens to be consistent with federal Social Security Income benefits. This will bring Maine into alignment with the majority of states that do not offer cash benefits. Nine months of savings are projected for fiscal year 2013-14 to allow for rulemaking. One-time funding for technology costs is included in FY 14.		Public Assistance	10	General Fund	1	T	\$0	\$0	(\$551,678)	(\$740,637)	\$0	0.000	0.000	
344	HHS-	165	131 State Supplement to Federal Supplemental Security Income	C-A-7013	Reduces funding by eliminating the spousal living allowance for legal non-citizens.	No justification provided.		Public Assistance	10	General Fund	1	T	\$0	\$0	(\$39,354)	(\$57,538)	\$0	0.000	0.000	
407	HHS-	158	228 Purchased Social Services	C-A-1510	Reduces funding to align allocations with existing resources.	This account is current over-allocated, with \$289,943 in allotment and a cash balance of \$34,301.74. This action adjusts allocation to more closely align with known or anticipated revenue.		Social Services	14	Other Special Revenue Funds	1	T	\$0	\$0	(\$239,943)	(\$239,943)	\$0	0.000	0.000	
408	HHS-	158	228 Purchased Social Services	C-A-1510	Reduces funding to align allocations with existing resources.	<del>This account is current over-allocated, with \$289,943 in allotment and a cash balance of \$34,301.74. This action adjusts allocation to more closely align with known or anticipated revenue.</del> This account is over allocated due to additional grant awards in previous years. This action adjusts allocation to more closely align with the grant award. (C-A-1512)		Social Services	15	Federal Block Grant Fund	1	T	\$0	\$0	(\$3,413,732)	(\$3,413,732)	\$0	0.000	0.000	
<b>Language Parts</b>																				
433	HHS-	186	NN		This Part does the following. 1. It repeals the elderly low-cost drug program. 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.							T								
434	HHS-	189	OO		This Part does the following. limits allowable costs for temporary housing at a homeless shelter to \$10 per night. It makes individuals who have reached the 60-month lifetime benefit under the TANF Program ineligible for General Assistance. It makes individuals who have been sanctioned under the TANF Program ineligible for General Assistance. It clarifies certain restrictions to eligibility in the General Assistance program. It reduces the reimbursement rate for allowable expenditures to 50% for all municipalities with the exception of Indian Tribes.							T								
435	HHS-	192	PP		This Part repeals the provision that requires the Department of Health and Human Services to provide supplemental security income for legal noncitizens.							T								
436	HHS-	193	QQ		This Part updates the base year for the hospital tax. (not one-time?)							T								

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437	HHS-	194	RR		This Part reduces the reimbursement for critical access hospitals from 109% of MaineCare allowable costs to 101% of MaineCare allowable costs effective April 1, 2013.							T							
438	HHS-	195	SS		This Part directs the Department of Health and Human Services to submit a Medicaid state plan amendment to remove the income disregard and effectively reduce the income limits to the federal minimums required in the Medicare savings program.							T							
439	HHS-	196	TT		This Part directs the Department of Health and Human Services to eliminate the state-funded cash payment to a spouse of a resident who is in a cost reimbursed boarding home or residential care facility.							T							
440	HHS-	197	UU		This Part gives the Department of Health and Human Services the authority to adopt emergency rules to implement any provisions of the bill over which it has specific authority that has not been addressed by some other Part of the bill.							T							
441	HHS-	198	VV		This Part establishes performance-based contract measures for Head Start programs.							T							
442	HHS-	199	WW		This Part eliminates medical coverage for certain persons who become eligible for boarding home coverage on a prospective basis.							T							
443	FHM-	26	MMM		This Part caps the transfer of slot machine income to the Fund for a Healthy Maine for the fiscal year ending June 30, 2014 and June 30, 2015 at \$4,500,000 annually and requires that any funds received in excess of \$4,500,000 annually be credited as General Fund undedicated revenue.							T							