DATE: April 24, 2012

TO: Interested Parties

FROM: Stefanie Nadeau, Director, Office of MaineCare Services

SUBJECT: Proposed Rule: Chapter 101, MaineCare Benefits Manual, Chapter III, Section 2, Adult Family Care Services

This letter gives notice of a proposed rule: Chapter 101, MaineCare Benefits Manual, Chapter III, Section 2, Adult Family Care Services. The proposed changes would reduce rates paid under this section by 10%. This proposed rule seeks to permanently adopt changes already made on an emergency basis that took effect April 1, 2012. The reduction in rates was directed in the Supplemental Budget, P.L. 2011, ch. 477, part M-1.

Rules and related rulemaking documents may be reviewed and printed from the Office of MaineCare Services website at http://www.maine.gov/dhhs/oms/rules/provider_rules_policies.html or for a fee, interested parties may request a paper copy of rules by calling 207-287-9368. For those who are deaf or hard of hearing and have a TTY machine, the TTY number is 711.

A concise summary of the proposed rule is provided in the Notice of Agency Rule-making Proposal. This notice also provides information regarding the rule-making process. Please address all comments to the agency contact person identified in the Notice of Agency Rule-making Proposal.
Notice of Agency Rule-making Proposal

AGENCY: Department of Health and Human Services, Office of MaineCare Services

RULE TITLE OR SUBJECT: Chapter 101, MaineCare Benefits Manual, Chapter III, Section 2, Adult Family Care Services

PROPOSED RULE NUMBER:

CONCISE SUMMARY: This proposed rule seeks to reduce rates paid under this section by 10%. These changes would permanently adopt changes already made on an emergency basis that took effect April 1, 2012. The reduction in rates was directed in the supplemental budget, P.L. 2011, ch. 477, part M-1.


THIS RULE WILL NOT HAVE A FISCAL IMPACT ON MUNICIPALITIES.

STATUTORY AUTHORITY: 22 M.R.S.A. §§ 42, 3173, Public Law 2011, Chapter 477, Part M-1

PUBLIC HEARING:

Date: Tuesday, May 22, 2012  9:30 AM
Location: Conference Room # 111B
        19 Union Street
        Augusta, ME

The Department requests that any interested party requiring special arrangements to attend the hearing contact the agency person listed above before May 11, 2012.

DEADLINE FOR COMMENTS: Comments must be received by midnight June 1, 2012.

AGENCY CONTACT PERSON: Derrick Grant, Comprehensive Health Planner
derrick.grant@maine.gov

AGENCY NAME: MaineCare Services
ADDRESS: 11 State House Station
         242 State Street
         Augusta, Maine  04333-0011

TELEPHONE: 207-287-6427  FAX: (207) 287-9369
            TTY: 711 (Deaf or Hard of Hearing)

PLEASE APPROVE BOTTOM PORTION OF THIS FORM AND ASSIGN APPROPRIATE MFASIS NUMBER

APPROVED FOR PAYMENT ___________________________ DATE: ________________

Authorized Signature

FUND: 010  AGENCY: 10A  ORG: 3026  APP: 012  JOB: OBJT: AMOUNT
FUND: 013  AGENCY: 10A  ORG: 3026  APP: 012  JOB: OBJT: AMOUNT
Providers will be reimbursed the resource-adjusted price for each member according to the resource group the member is assigned as a result of the MDS-ALS assessment. The Department will reimburse updated resource adjusted prices twice each year upon reassessments as detailed in Chapter II, Section II. Providers must bill using the UB-92 and according to “Billing Instructions for Adult Family Care Services.”

<table>
<thead>
<tr>
<th>Description</th>
<th>Maximum Allowance</th>
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<tbody>
<tr>
<td>Adult Family Care Services</td>
<td>Resource-Adjusted Price, determined by Resource group assignment as a result of MDS-ALS Assessment</td>
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**Eff. 4/1/12**

The new rates listed below are effective April 1, 2012.

<table>
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<tr>
<th>Resource Group</th>
<th>MaineCare Weight</th>
<th>Resource Adjusted Price (Based on $38.93 UnAdjusted Price Multiplied by MaineCare weight)</th>
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