

LR 2678 (DHHS SUPPLEMENTAL BUDGET)
PUBLIC HEARING BREAKOUT
SEE PUBLIC HEARING GUIDANCE FOR INFORMATION ON PROCEDURES

| Page | LANGUAGE PART(S) | HEARING CLASSIFICATION | PROGRAM | DESCRIPTION |
|--------------------------------|------------------|----------------------------|--|--|
| Wednesday December 14th | | | | |
| A-11,L-8,L-11 | G, J | ELDERLY | LOW-COST DRUGS TO MAINE'S ELDERLY | 0202 "Wrap Benefit" and payment of Medicare Part D premiums for certain people |
| A-17,A-12 | | ELDERLY | MR/ELDERLY PNMI ROOM AND BOARD | Z009 Optional Service - Adult Family Care |
| A-17,L-2,L-3 | B, C | ELDERLY | MR/ELDERLY PNMI ROOM AND BOARD | Z009 Optional Service - Occupational Therapy |
| A-17,L-2,L-3 | B, C | ELDERLY | MR/ELDERLY PNMI ROOM AND BOARD | Z009 Optional Service - Physical Therapy |
| A-17,L-4 | D | ELDERLY | MR/ELDERLY PNMI ROOM AND BOARD | Z009 Optional Coverage - Individuals in the Medically Needy category |
| A-18,L-2,L-3 | B, C | ELDERLY | NURSING FACILITIES | 0148 Optional Service - Occupational Therapy |
| A-18,L-3,L-3 | B, C | ELDERLY | NURSING FACILITIES | 0148 Optional Service - Physical Therapy |
| A-14 | | ELDERLY | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - PNMI |
| A-1 | | DEVELOPMENTAL DISABILITIES | DEVELOPMENTAL SERVICES - COMMUNITY | 0122 Rental Assistance Reimbursement |
| A-1,A-16 | | DEVELOPMENTAL DISABILITIES | DEVELOPMENTAL SERVICES WAIVER - MAINECARE | 0987 Payment Reform |
| A-3, | | DEVELOPMENTAL DISABILITIES | MEDICAID SERVICES - DEVELOPMENTAL SERVICES | 0705 Optional Service - PNMI |
| A-3, | | DEVELOPMENTAL DISABILITIES | MEDICAID SERVICES - DEVELOPMENTAL SERVICES | 0705 Optional Service - Targeted Case Management |
| A-14 | | CHILDREN BEHAVIORAL HEALTH | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - PNMI |
| A-4,A-12 | | CHILDREN BEHAVIORAL HEALTH | MENTAL HEALTH SERVICES - CHILD MEDICAID | 0731 Optional Coverage - 19 and 20 year olds with income< 150% |
| A-4,A-16 | | CHILDREN BEHAVIORAL HEALTH | MENTAL HEALTH SERVICES - CHILD MEDICAID | 0731 Optional Coverage - behaviorally challenged children in a residential setting |
| A-4, | | CHILDREN BEHAVIORAL HEALTH | MENTAL HEALTH SERVICES - CHILDREN | 0136 Coverage Cubcare families between 150% and 200% in current biennium |
| A-4 | | CHILDREN BEHAVIORAL HEALTH | MENTAL HEALTH SERVICES - CHILDREN | 0136 Contracts for Residential Services |
| A-8,A-12 | | CHILDREN/FAMILIES | BUREAU OF MEDICAL SERVICES | 0129 Coverage Cubcare families between 150% and 200% in current biennium |
| A-10 | | CHILDREN/FAMILIES | HEAD START | 0545 Head Start |
| A-12,L-7 | F | CHILDREN/FAMILIES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Coverage - families covered above mandatory federal levels |
| A-19 | | CHILDREN/FAMILIES | STATE-FUNDED FOSTER CARE/ADOPTION ASSISTANCE | 0139 WrapAround ME program |
| A-19 | | CHILDREN/FAMILIES | STATE-FUNDED FOSTER CARE/ADOPTION ASSISTANCE | 0139 Contracts in the alternative response program |
| A-19 | | CHILDREN/FAMILIES | STATE-FUNDED FOSTER CARE/ADOPTION ASSISTANCE | 0139 Contracts in the family reunification program |
| A-12 | | VARIOUS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Consumer Directed Attendant Services |
| Thursday December 15th | | | | |
| A-14 | | ADULT MENTAL HEALTH | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - PNMI |
| A-5 | | ADULT MENTAL HEALTH | MENTAL HEALTH SERVICES - COMMUNITY | 0121 Limiting availability of Crisis Services to severely mentally ill |
| A-5 | | ADULT MENTAL HEALTH | MENTAL HEALTH SERVICES - COMMUNITY MEDICAID | 0132 Optional Coverage - 19 and 20 year olds with income< 150% |
| A-5 | | ADULT MENTAL HEALTH | MENTAL HEALTH SERVICES - COMMUNITY MEDICAID | 0132 Optional Service - PNMI |
| A-13 | | SUBSTANCE ABUSE | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Targeted Case Management |
| A-14 | | SUBSTANCE ABUSE | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - PNMI |
| A-6 | | SUBSTANCE ABUSE | OFFICE OF SUBSTANCE ABUSE - MEDICAID SEED | 0844 Optional Service - PNMI |
| A-15 | | SUBSTANCE ABUSE | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Limiting the use of suboxone for treatment of opioid dependency |
| A-13 | | HOMELESS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Targeted Case Management |
| A-13 | | HIV | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Targeted Case Management |
| A-12 | | ADULT MEDICAID | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Coverage - 19 and 20 year olds with income< 150% |
| A-14 | | ADULT MEDICAID | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Childless Adult Waiver contributions from Dirigo in FY12 |
| A-15,L-7 | F | ADULT MEDICAID | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Childless Adult Waiver program |
| Friday December 16th | | | | |
| ,L-15 | N | FHM | | Eliminates the transfer of net slot machine revenue to FHM in FY13 |
| A-9 | | FHM | FHM - HEAD START | 0959 Redistribution in FHM |
| A-10 | | FHM | FHM - IMMUNIZATION | Z048 Redistribution in FHM |
| A-10 | | FHM | FHM - PURCHASED SOCIAL SERVICES | 0961 Redistribution in FHM |
| A-9 | G | FHM | FHM - DRUGS FOR THE ELDERLY AND DISABLED | Z015 "Wrap Benefit" and payment of Medicare Part D premiums for certain people |
| A-9 | | FHM | FHM - DRUGS FOR THE ELDERLY AND DISABLED | Z015 Reimbursement of brand name drugs from 4 to 2 per month |

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|---------------|----------|------------------------------|---|---|
| | PART(S) | HEARING CLASSIFICATION | | |
| A-9 | | FHM | FHM - DRUGS FOR THE ELDERLY AND DISABLED | Z015 Redistribution in FHM |
| A-8 | | FHM | FHM - BUREAU OF HEALTH | 0953 Redistribution in FHM |
| A-8 | | FHM | FHM - DONATED DENTAL | 0958 Redistribution in FHM |
| A-9 | | FHM | FHM - FAMILY PLANNING | 0956 Redistribution in FHM |
| A-10,A-16 | | FHM | FHM - MEDICAL CARE | 0960 Redistribution in FHM |
| A-10 | | FHM | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Redistribution in FHM to Medical Care program |
| A-12 | | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Ambulatory Surgical Center Services |
| A-13,L-6,L-12 | E, K | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Dental Services |
| A-13,L-3 | C | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Occupational Therapy |
| A-13,L-3 | C | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Vision Services |
| A-13,L-3 | C | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Physical Therapy |
| A-13,L-3 | | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Podiatry |
| A-14 | C | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Sexually Transmitted Disease Clinic Services |
| A-14,L-3 | C | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Optional Service - Chiropractic Services |
| A-14 | | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement of brand name drugs from 4 to 2 per month |
| A-16 | | OTHER SERVICES | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement for smoking cessation products |
| L-3 | | OTHER SERVICES | | Eliminates copayments for speech therapy services in the MaineCare program |
| A-14,L-14 | M | HOSPITALS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement for Critical Access Hospitals |
| A-15 | | HOSPITALS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement for number of outpatient hospital visits |
| A-15 | | HOSPITALS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement for number of hospital admissions |
| A-16 | | HOSPITALS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Funding for Outpatient Services at acute care hospitals |
| A-16 | | HOSPITALS | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Reimbursement for Hospital Inpatient Services |
| L-17 | | DAFS ADMIN | | Interfund advance from OSR to GF (one-day borrowing) |
| A-8 | | DHHS ADMIN | DEPARTMENTWIDE | 0640 Salary Savings |
| L-9 | H | DHHS POLICY | | Allows DHHS to eliminate a services provided under the state Medicaid program |
| L-13 | L | POLICY | | Gives DHHS the authority to adopt emergency rules to implement this bill |
| L-16 | O | DHHS ADMIN | | Lapses funds from BMS to unappropriated surplus of the General Fund |
| L-10 | I | POLICY | | Repeals the MaineCare Basic Program |
| A-1 | | Funding for "Cycle Payments" | DEVELOPMENTAL SERVICES WAIVER - MAINECARE | 0987 Funding for MaineCare Cycle Payments |
| A-1 | | Funding for "Cycle Payments" | DEVELOPMENTAL SERVICES WAIVER - SUPPORTS | Z006 Funding for MaineCare Cycle Payments |
| A-11 | | Funding for "Cycle Payments" | LOW-COST DRUGS TO MAINE'S ELDERLY | 0202 Funding for MaineCare Cycle Payments |
| A-3 | | Funding for "Cycle Payments" | MEDICAID SERVICES - DEVELOPMENTAL SERVICES | 0705 Funding for MaineCare Cycle Payments |
| A-15 | | Funding for "Cycle Payments" | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Funding for MaineCare Cycle Payments |
| A-4 | | Funding for "Cycle Payments" | MENTAL HEALTH SERVICES - CHILD MEDICAID | 0731 Funding for MaineCare Cycle Payments |
| A-17 | | Funding for "Cycle Payments" | MR/ELDERLY PNMI ROOM AND BOARD | Z009 Funding for MaineCare Cycle Payments |
| A-18 | | Funding for "Cycle Payments" | NURSING FACILITIES | 0148 Funding for MaineCare Cycle Payments |
| A-6 | | Funding for "Cycle Payments" | OFFICE OF SUBSTANCE ABUSE - MEDICAID SEED | 0844 Funding for MaineCare Cycle Payments |
| A-1 | | Funding for FMAP Reduction | DEVELOPMENTAL SERVICES WAIVER - MAINECARE | 0987 Replacement Funding for FMAP Reduction |
| A-1 | | Funding for FMAP Reduction | DEVELOPMENTAL SERVICES WAIVER - SUPPORTS | Z006 Replacement Funding for FMAP Reduction |
| A-2 | | Funding for FMAP Reduction | DISPROPORTIONATE SHARE - DOROTHEA DIX PSYCHIATRIC | 0734 Replacement Funding for FMAP Reduction |
| A-2 | | Funding for FMAP Reduction | DISPROPORTIONATE SHARE - RIVERVIEW PSYCHIATRIC CENTER | 0733 Replacement Funding for FMAP Reduction |
| A-2 | | Funding for FMAP Reduction | DOROTHEA DIX PSYCHIATRIC CENTER | 0120 Replacement Funding for FMAP Reduction |
| A-10 | | Funding for FMAP Reduction | FHM - MEDICAL CARE | 0960 Replacement Funding for FMAP Reduction |
| A-2 | | Funding for FMAP Reduction | FHM - SUBSTANCE ABUSE | 0948 Replacement Funding for FMAP Reduction |
| A-11 | | Funding for FMAP Reduction | IV-E FOSTER CARE/ADOPTION ASSISTANCE | 0137 Replacement Funding for FMAP Reduction |
| A-3 | | Funding for FMAP Reduction | MEDICAID SERVICES - DEVELOPMENTAL SERVICES | 0705 Replacement Funding for FMAP Reduction |
| A-15 | | Funding for FMAP Reduction | MEDICAL CARE - PAYMENTS TO PROVIDERS | 0147 Replacement Funding for FMAP Reduction |
| A-4 | | Funding for FMAP Reduction | MENTAL HEALTH SERVICES - CHILD MEDICAID | 0731 Replacement Funding for FMAP Reduction |
| A-5 | | Funding for FMAP Reduction | MENTAL HEALTH SERVICES- COMMUNITY MEDICAID | 0732 Replacement Funding for FMAP Reduction |
| A-18 | | Funding for FMAP Reduction | NURSING FACILITIES | 0148 Replacement Funding for FMAP Reduction |
| A-6 | | Funding for FMAP Reduction | OFFICE OF SUBSTANCE ABUSE - MEDICAID SEED | 0844 Replacement Funding for FMAP Reduction |
| A-6 | | Funding for FMAP Reduction | RIVERVIEW PSYCHIATRIC CENTER | 0105 Replacement Funding for FMAP Reduction |
| A-6 | | Funding for FMAP Reduction | TRAUMATIC BRAIN INJURY SEED | Z042 Replacement Funding for FMAP Reduction |