

EARLE L. MCCORMICK, District 21, Chair
 NICHI S. FARNHAM, District 32
 MARGARET M. CRAVEN, District 16



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 LESLIE T. FOSSEL, Alna
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 BETH A. O'CONNOR, Berwick
 DEBORAH J. SANDERSON, Chelsea
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 MATTHEW J. PETERSON, Rumford
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 PETER C. STUCKEY, Portland

JANE ORBETON, Legislative Analyst
 ANNA BROOME, Legislative Analyst
 LISA M. COTE, Committee Clerk

State of Maine
 ONE HUNDRED AND TWENTY-FIFTH LEGISLATURE
 COMMITTEE ON HEALTH AND HUMAN SERVICES

MEMORANDUM

To: Sen. Richard W. Rosen, Senate Chair
 Rep. Patrick S. A. Flood, House Chair
 Joint Standing Committee on Appropriations and Financial Affairs

From: Sen. Earle L. McCormick, Senate Chair
 Rep. Meredith N. Strang Burgess, House Chair
 Joint Standing Committee on Health and Human Services

Date: April 8, 2011

Re: Recommendations on LD 1043, An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2012 and June 30, 2013

The Health and Human Services Committee is pleased to provide the committee report on LD 1043, the biennial budget for FY12 and FY13. The report of the Health and Human Services Committee consists of this letter and the following appendices:

- Appendix A, HHS Committee Programs – Major Policy Items
- Appendix B, HHS Committee – DHHS Management Items
- Appendix C, HHS Committee – Baseline Items
- Appendix D, HHS Committee – Tabled Change Package Items
- Appendix E, Report of the Minority of the HHS Committee


In addition to the information on the spreadsheets and in the report of the minority we would like to draw to your attention a few matters.

- The committee did not vote on the items that were tabled awaiting the Change Package from the Governor as we expect the Change Package to substantially change each initiative description or its accompanying budget impact.
- The committee considered but did not reach a final decision on a proposal to raise the nursing facility tax from 5.5 to 6% of annual net operating revenue, directing new revenue to nursing facility reimbursement, and to raise the residential treatment facilities assessment from 5.5 to 6% of annual gross patient services revenue, directing new revenue to long-term care services.
- The minority on the committee is discussing a comprehensive public assistance proposal that will address issues in a number of programs.

- On item 358, General Assistance – Reimbursement to Cities and Towns, Senator Farnham and Representative Strang Burgess wish to note that they voted against the budget initiative because of the City of Bangor's and City of Portland's positions as service center cities that expend greater than .0003 of its most recent valuation on General Assistance benefits. Bangor stands to lose \$240,000 per year as a result of the initiative, Portland stands to lose \$670,786 per year, and Lewiston stands to lose \$22,991 per year. Senator Farnham and Representative Strang Burgess wish to note that the Legislature has before it a number of bills that propose uniform administration of the General Assistance program and a study to improve its operation statewide, including LD 1039 and 1431.
- On item 223, Fund for a Healthy Maine – Substance Abuse, the majority voted to restore \$2,500,000 per year to the account for use in substance abuse prevention and treatment by the Office of Substance Abuse. The majority suggests as a source of funding for this restoration a funding cut in all Fund for a Healthy Maine accounts not affected by biennial budget initiatives, to be shared on a proportional basis based on the All Other lines of their accounts through across the board cuts to be determined by the State Budget Officer.

Committee members are prepared to discuss this report with you. Thank you for your consideration.

Sincerely,



Sen. Earle L. McCormick
Senate Chair



Rep. Meredith N. Strang Burgess
House Chair

cc: Members, Health and Human Services Committee
Commissioner Mary Mayhew, DHHS
Commissioner Stephen Bowen, DoE
Mary Ann Lynch, Judicial Branch
Alan Prysunka, Executive Director, MHDO
Jan Clarkin, Executive Director, MCT
Kandyce Powell, MHC
Kim Moody, DRC
Karynlee Harrington, DHA
Bill Norbert, FAME
Dean Crocker, MCA
John Dean, State Fire Marshal
Maureen Dawson, OFPR
Christopher Nolan, OFPR
Jane Orbeton, OPLA

SENATE

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NICHI S. FARNHAM, District 32
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HOUSE

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COMMITTEE ON HEALTH AND HUMAN SERVICES

MEMORANDUM

To: Sen. Richard W. Rosen, Senate Chair
Rep. Patrick S. A. Flood, House Chair
Joint Standing Committee on Appropriations and Financial Affairs

From: Sen. Margaret M. Craven
Rep. Mark Eves
Joint Standing Committee on Health and Human Services

Date: April 8, 2011

Re: Minority Report, Recommendations on LD 1043, An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2012 and June 30, 2013

The minority members of the Health and Human Services Committee are pleased to provide their report on the Biennial Budget Bill, LD 1043.

More than any other single piece of legislation that our committee will consider, the state budget is the most important. It sets the priorities for our state for the next two years, and its effects reach into every community and touch every life in Maine.

The committee has worked in good faith to understand the implications of the proposed changes to programs that protect Maine's most vulnerable residents. In some cases, the changes are being sought as ways to save money; in others, the changes are about philosophical assumptions. Despite our differences we believe our goals are the same – to build a better life for all Maine people – and together we must find constructive solutions that we can all agree upon.

After much deliberation, the signers of the minority report cannot support many of the changes to the budget as proposed. While the proposals may save the state budget money in the short-term, they will add long-term costs and then shift those additional burdens to other places within the state budget, to local governments and to the private and nonprofit sectors. Most importantly, they will do real harm to families who are struggling to build a better, more stable life for themselves.

Despite our opposition to these proposals, we take seriously our duty to help find a course of action that balances the state budget for the next two years, and we are working with the Department of Health and Human Services and others to find different approaches that will reduce costs to the General Fund and provide more appropriate services to the poor, the disabled, the young and the elderly.

To this end we direct you to two attachments:

- 1. Alternative General Fund Savings Initiative**
- 2. Comprehensive Public Assistance Proposal**

This is by no means an exhaustive list of alternatives, but rather beginning thoughts about how to achieve savings while protecting the most vulnerable residents in Maine. As the Appropriations Committee continues its important work on the state budget, we stand ready to assist in any way we can, and we know that the expertise of your committee can find a reasonable approach to the state budget that protects the poorest and most fragile among us while also safeguarding an economy that is beginning to re-emerge from recession.

Minority committee members are prepared to discuss this report with you. Thank you for your consideration.

Sincerely,



Senator Margaret M. Craven



Rep. Mark W. Eves

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Major Policy Items

Appendix A

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
1	121	Mental Health Services - Community	C-A-1507	Provides funding for mental health services for individuals not eligible for MaineCare and for housing services in order to conform with the consent decree.	This proposal requests funding based on the June 25, 2010 update from the Court Master. The request is comprised of \$4,664,250 to restore mental health services for non-MaineCare clients and \$995,000 in additional funds for housing through the Bridging Rental Assistance Program (BRAP).	<i>Info requested on eligibility criteria.</i>	Adult MH	General Fund	2	3320	IN	0.000	0.000	\$5,659,250	\$5,659,250
2	121	Mental Health Services - Community	C-A-7008	Reduces funding in the Office of Management and Budget program and provides funding in the Mental Health Services - Community program to properly account for the Olmstead Grant.	The Olmstead Grant addresses barriers and recommendations in support of integrated services for persons with mental illness. In a consumer- and family-driven system, consumers choose their own programs and the providers that will help them most. Their needs and preferences drive the policy and financial decisions that affect them. Care is consumer-centered, with providers working in full partnership with the consumers they serve to develop individualized plans of care. This initiative will reflect the funding for the Olmstead grant in the appropriate program within the department.	<i>See next item.</i>	Adult MH	Other Special Rev. Funds	2	3330	IN	0.000	0.000	\$20,000	\$20,000
3	142	Office of Management and Budget	C-A-7008	Reduces funding in the Office of Management and Budget program and provides funding in the Mental Health Services - Community program to properly account for the Olmstead Grant.	The Olmstead Grant addresses barriers and recommendations in support of integrated services for persons with mental illness. In a consumer- and family-driven system, consumers choose their own programs and the providers that will help them most. Their needs and preferences drive the policy and financial decisions that affect them. Care is consumer-centered, with providers working in full partnership with the consumers they serve to develop individualized plans of care. This initiative will reflect the funding for the Olmstead grant in the appropriate program within the department.	<i>See prior item.</i>	Adult MH	Other Special Rev. Funds	6	12370	IN	0.000	0.000	(\$512)	(\$512)
4	734	Disproportionate Share - Dorothea Dix Psychiatric Center	C-A-7033	Reduces funding from savings to be achieved from the review of the future role and structure of the Dorothea Dix Psychiatric Center by the working group established in this Act. The State Budget Officer is authorized to distribute these savings among the various line categories and accounts of the center by financial order upon the approval of the Governor. Any such transfers are considered adjustments to appropriations.	A working group established in Part NN this Act will be convened to develop a plan for the future role and structure of the Dorothea Dix Psychiatric center effective June 30, 2012. The plan along with proposed legislation will be submitted to the Legislature no later than December 1, 2011.	<i>Info requested on NN, membership (legislators, providers from northern region of state), duties (possible continuing role of DDPC, role of RPC and other hospitals). Info requested on staffing at DDPC. Info requested on how these \$2.5m in savings might be achieved in FY13.</i>	Adult MH	General Fund	15	3950	IN	0.000	0.000	\$0	(\$2,500,000)

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22	137	IV-E Foster Care/Adoption Assistance	C-A-1328	Transfers funding from the IV-E Foster Care/Adoption Assistance program to the State-funded Foster Care/Adoption Assistance program to properly reflect anticipated earned revenue.	This initiative transfers funding to properly reflect anticipated earned revenue.	<i>See item below.</i>	Children's Services	Other Special Rev. Funds	1	11810	IN	0.000	0.000	(\$4,500,000)	(\$4,500,000)
23	139	State-funded Foster Care/Adoption Assistance	C-A-1328	Transfers funding from the IV-E Foster Care/Adoption Assistance program to the State-funded Foster Care/Adoption Assistance program to properly reflect anticipated earned revenue.	This initiative transfers funding to properly reflect anticipated earned revenue.	<i>See item above.</i>	Children's Services	Other Special Rev. Funds	1	12010	IN	0.000	0.000	\$4,500,000	\$4,500,000
24	137	IV-E Foster Care/Adoption Assistance	C-A-1432	Reduces funding based on prior year expenditure trends.	Expenditure trends in prior years and reductions in the number of children in state custody will allow the deappropriation without a reduction in services.	<i>Info requested on history of foster care program, children and families served, numbers assumed for budget, spending out of state, number and spending on adoption, numbers of children receiving child welfare services who are not in state care, transfers of funding, frequency and history of federal audits. Info requested on homeless youth program, utilization, funding sources for children below 13 and children 13 and above.</i>	Children's Services	General Fund	1	11820	IN 8-5	0.000	0.000	(\$1,500,000)	(\$1,500,000)
25	731	Mental Health Services - Child Medicaid	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Children's Services	General Fund	17	3770	T CP	0.000	0.000	\$10,327,204	\$10,327,204
26	147	Medical Care - Payments to Providers	C-A-7018	Reduces funding to reflect the annualized savings associated with the creation of a children's waiver.	PL 2009, c. 571 included an initiative to implement a new section of MaineCare policy to serve children. Anticipating the amount of time needed to develop the waiver, only 6 months of savings were projected in fiscal year 2010-11. As a result, the 2012-2013 baseline budget appropriation reflected only 6 months of savings. This initiative reflects the remaining savings related to the creation of the waiver.	<i>Info requested on waiver, impact on providers and families. How will these savings be achieved? Info requested on staffing on OCFS, separated by type of work done. See item below. Info requested on children's mental health and CDS, examples and scenarios, coordination of care.</i>	Children's Services	General Fund	1	12910	IN	0.000	0.000	(\$522,068)	(\$516,646)

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27	147	Medical Care - Payments to Providers	C-A-7018	Reduces funding to reflect the annualized savings associated with the creation of a children's waiver.	PL 2009, c. 571 included an initiative to implement a new section of MaineCare policy to serve children. Anticipating the amount of time needed to develop the waiver, only 6 months of savings were projected in fiscal year 2010-11. As a result, the 2012-2013 baseline budget appropriation reflected only 6 months of savings. This initiative reflects the remaining savings related to the creation of the waiver.	See item above.	Children's Services	Federal Expend. Fund	1	12920	IN	0.000	0.000	(\$904,347)	(\$889,959)
28	228	Purchased Social Services	C-A-7027	Reduces funding by revising the rates paid for child care.	The department will revise its rules to reduce State paid child care rates from 100% of the 75th percentile of the local market-rate survey to 50%.	Info requested on: current and proposed rates, timing of market survey, how savings will be achieved; all child care assistance, children, providers, reimbursement rates, effects of reimbursement reduction; child care by region or county, private pay rates, acceptance of subsidies, % revenue from subsidies; TANF child care benefits; DHHS's obligations under Title 22, section 8308 and contract with child care providers; child care food program opportunities for coordination with DoEd, number of Head Start agencies, functions and possible overlap among Head Start, child care, other DHHS programs (eligibility, services, funding); Head Start funding sources, history, availability of ARRA funding to providers; and the need for state funding, MOE, access, regional equalization. CP to change savings est.	Children's Services	General Fund	1	13440	T CP	0.000	0.000	(\$266,619)	(\$355,492)
56	122	Developmental Services - Community	C-A-1509	Reduces funding to align allocations with current resources.	Reduces funding for grants due to the nonrenewal of federal grants in this account.		Developmt Services	Federal Expend. Fund	61	3400	IN	0.000	0.000	(\$387,122)	(\$387,122)

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57	705	Medicaid Services - Developmental Services	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. Info requested on populations, utilization, waiting lists, numbers aging out of school system each year, spending history, estimates of elderly caring for adult children with intellectual disabilities who will need assistance. Info requested on assessment of need, placement process off the waiver. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Developmt Services	General Fund	12	3670	T CP	0.000	0.000	\$7,320,412	\$7,320,412
194	211	Independent Housing with Services	C-A-1473	Transfers funding for grants for assisted living services from the Long Term Care - Human Services program to the Independent Housing with Services program.	Transfers funding for operating costs associated with the Assisted Living Facilities program from the Home Based Care program to the Independent Housing with Services program. This transfer will result in all funding for these services being located in one program.	<i>See item below. Information requested on transfers in last 2 biennia between NF account and MAP account and justifications for transfers.</i>	Elder Services	General Fund	1	13370	IN	0.000	0.000	\$1,016,000	\$1,016,000
195	420	Long Term Care - Human Services	C-A-1473	Transfers funding for grants for assisted living services from the Long Term Care - Human Services program to the Independent Housing with Services program.	Transfers funding for operating costs associated with the Assisted Living Facilities program from the Home Based Care program to the Independent Housing with Services program. This transfer will result in all funding for these services being located in one program.	<i>See item above.</i>	Elder Services	General Fund	1	13610	IN	0.000	0.000	(\$1,016,000)	(\$1,016,000)
196	927	Maine Rx Plus Program	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	Committee amendment to achieve proposed savings by establishing a fee to replace GF appropriation.	Elder Services	General Fund	1	14140	AMD	0.000	0.000	(\$105,815)	(\$105,815)
197	147	Medical Care - Payments to Providers	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	See item above.	Elder Services	General Fund	1	12930	AMD	0.000	0.000	(\$29,500)	(\$29,500)
198	147	Medical Care - Payments to Providers	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	See item above.	Elder Services	Federal Expend. Fund	1	12940	AMD	0.000	0.000	(\$51,101)	(\$50,816)

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199	Z009	MR/Elderly PNMI Room and Board	C-A-7028	Reduces funding from savings by imposing a penalty for certain transfers of assets to qualify for state support for boarding home services.	The department will revise its rules related to the transfer of assets in the MaineCare Eligibility Manual in order to implement the option under Title 22, section 3174-A, which allows the imposition of a penalty for certain transfers of assets to obtain help with state-funded assistance in certain boarding home settings.	<i>See Language MM. Info requested on last 2 biennia and coming biennium: why baseline is below prior years' costs, # residents, GF and other funding, plan for paying costs. Info requested on asset transfer and spousal protection, federal requirements for PNMI's and NF. What will be effect on persons using long-term care services? What Maine is doing now and what is proposed? Is the proposal approvable by federal CMS? Are the savings achievable?</i>	Elder Services	General Fund	1	14530	IN	0.000	0.000	(\$216,000)	(\$216,000)
200	420	Long Term Care - Human Services	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Info requested on effect of proposal on families, data on each category proposed for premium. Do some of these families already pay premiums, at what levels? Do some already pay co-pays, at what levels? Potential MOE problem with ACA? Is CMS likely to approve? Is statutory language needed?</i>	Elder Services	General Fund	1	13620	T CP	0.000	0.000	(\$745,000)	(\$745,000)
213	948	FHM - Substance Abuse	C-A-1477	Deallocates funds to segregate Medicaid match from match for other grant programs within the FHM - Substance Abuse program.	Funding in this account is used to match multiple grant awards. Transferring the Medicaid portion to a separate appropriation allows for better tracking of costs.	<i>Need fund shift to meet MOE?</i>	FHM	Fund for a Healthy Maine	1	4065	IN	0.000	0.000	(\$1,257,666)	(\$1,257,666)
214	948	FHM - Substance Abuse	C-A-1477	Allocates funds to segregate Medicaid match from match for other grant programs within the FHM - Substance Abuse program.		<i>See item above.</i>	FHM	Fund for a Healthy Maine	2		IN	0.000	0.000	\$1,257,666	\$1,257,666

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215	Z068	FHM - School Breakfast Program	C-A-25	Provides funding to reimburse those public schools that are providing breakfast for the cost of providing free breakfast to eligible students.	This initiative provides funding to reimburse those public schools kindergarten to grade 12 that provide breakfast for the amount equal to the difference between the federal reimbursement for a free breakfast and the federal reimbursement for a reduced-price breakfast for each student eligible for a reduced-price breakfast who is receiving breakfast. The number of students who qualify for reduced breakfasts, and participate in the program, has increased beyond current funding levels for the program. These additional funds are necessary to meet the demand and comply with the requirements of the statute.	Info requested on all FHM accounts explanation of impact of proposals on federal matching funds, what criteria were used to decide on funding levels, who had input into the decisions. Info requested on alternative funding available for all services/contracts proposed for cuts.	FHM	Fund for a Healthy Maine	1	8390	IN	0.000	0.000	\$61,652	\$61,652
216	950	FHM - Health Education Centers	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.		FHM	Fund for a Healthy Maine	2	10810	IN 8-5	0.000	0.000	(\$100,353)	(\$100,353)
217	951	FHM - Dental Education	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on impact and number of persons affected.</i>	FHM	Fund for a Healthy Maine	1	10840	IN 7-6	0.000	0.000	(\$237,740)	(\$237,740)
218	952	FHM - Quality Child Care	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on impact of initiative, number of persons affected.</i>	FHM	Fund for a Healthy Maine	3	10870	IN 7-6	0.000	0.000	(\$143,629)	(\$143,629)
219	963	FHM - Judicial Department	C-A-7001	Eliminates one Diversion and Rehabilitation Coordinator position and related All Other to reflect the redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on savings from adult drug court and costs of eliminating adult drug court.</i>	FHM	Fund for a Healthy Maine	1	16570	IN 8-5	-1.000	-1.000	(\$115,534)	(\$118,387)
220	Z070	FHM - Dirigo Health	C-A-7003	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on impact on persons covered by Dirigo Choice, covered under MaineCare parent expansion, impact on Dirigo Choice.</i>	FHM	Fund for a Healthy Maine	1	7350	IN 8-5	0.000	0.000	(\$4,291,311)	(\$4,291,311)

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221	964	FHM - Fire Marshal	C-A-7003	Eliminates 3 Public Safety Inspector II positions and reduces one Office Assistant II position funded 50% in the Fire Marshal - Office of program and 50% in the FHM - Fire Marshal program to part-time, funded in the Fire Marshal - Office of program, and eliminates related All Other funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on impact on Fire Marshal services regionally, particularly in Aroostook County, impact on current Fire Marshal staff, bumping rights, alternative funding that might offset lost FHM funding.</i>	FHM	Fund for a Healthy Maine	1	20440	T CP	-3.000	-3.000	(\$250,419)	(\$256,865)
222	949	FHM - School Nurse Consultant	C-A-7007	Eliminates one Education Specialist III position and related All Other to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on issues that school nurse consultant currently addresses and how those functions will be performed. Info requested on potential other funding for position.</i>	FHM	Fund for a Healthy Maine	10	8220	IN 8-5	-1.000	-1.000	(\$103,028)	(\$105,402)
223	948	FHM - Substance Abuse	C-A-7020	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on maintaining Adult Drug Court; what services will be retained and what eliminated, of current and proposed services and contractors; potential savings in administration and paperwork in SA programs; the # persons who will lose services, # who will have services reduced, providers of services affected; residential and nonresidential programs that will be affected, and cost savings to MaineCare and society from participation; savings across the state, the economy and reduced need for services, from Maine's work in SA prevention and treatment; performance-based contracting; how drug court will operate without Judicial Branch FHM funding; and applications of "best practice models" to contract grant funding and evaluation in the past. HHS Committee majority amendment reduces deallocation \$2.5 million per year to -\$1,848,306 per year.</i>	FHM	Fund for a Healthy Maine	1	4080	AMD 8-5	0.000	0.000	(\$4,348,306)	(\$4,348,306)

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224	953	FHM - Bureau of Health	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>Info requested on breakdown of services and contractors for all sub-accounts being cut and being retained. Info requested on impact on oral health programs, available ACA funds.</i>	FHM	Fund for a Healthy Maine	1	14210	IN 7-6	0.000	0.000	(\$878,652)	(\$878,652)
225	953	FHM - Bureau of Health	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>Info requested on original program rationale and program history for home visiting and cost-effectiveness, return on investment. Info requested on home visiting # of families affected, communities served, alternative funding options, ACA funds, program successes, program options.</i>	FHM	Fund for a Healthy Maine	6	14220	IN 7-6	0.000	0.000	(\$4,653,383)	(\$4,653,383)
226	955	FHM - Bureau of Medical Services	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>See item above.</i>	FHM	Fund for a Healthy Maine	1	14250	IN	0.000	0.000	(\$1,029)	(\$1,029)
227	956	FHM - Family Planning	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>Info requested on family planning programs, history of funding in this account and other accounts, impact of proposed cuts on people, services, unmet need. Info needed on different forms of FP programs across the state.</i>	FHM	Fund for a Healthy Maine	1	14280	IN 7-6	0.000	0.000	(\$401,430)	(\$401,430)
228	958	FHM - Donated Dental	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>Info needed on cost of program, impact of cut, options for persons getting dental care thru program.</i>	FHM	Fund for a Healthy Maine	1	14340	IN 8-5	0.000	0.000	(\$36,463)	(\$36,463)
229	962	FHM - Bone Marrow Screening	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	<i>Info requested on this program, funding and program that would remain after initiative, numbers of people screened before and after FHM funding, length of time a persons stays on bone marrow screening registry.</i>	FHM	Fund for a Healthy Maine	1	14450	IN	0.000	0.000	(\$80,218)	(\$80,218)

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230	957	FHM - Service Center	C-A-7022	Eliminates 4 Social Services Program Specialist I positions and one Office Associate II position and related All Other to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	<i>Info requested on impact of proposed cuts on performance of duties by investigating team, impact on office/program funding, impact on staff performance of duties. CP proposal to keep FHM deallocation but identify alternative funding source to retain positions.</i>	FHM	Fund for a Healthy Maine	1	14310	T CP	-5.000	-5.000	(\$352,551)	(\$369,088)
231	Z015	FHM - Drugs for the Elderly and Disabled	C-A-7030	Reduces funding to reflect a redistribution of funding and the reduction of resources among the various programs previously funded in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the reduction of resources for this Fund for a Healthy Maine account.	<i>Info requested on funding flows, DEL connection with Medicare Savings program, federal funds or benefits that will be lost. Info requested on method and rationale for increasing Medicare Buy-In income threshold, rationale for reduction, # people who will lose coverage. Requested side-by-side on Medicare Buy-In programs, current and proposed and impact of proposed. Requested info on impact of this cut on uncompensated care.</i>	FHM	Fund for a Healthy Maine	1	14560	IN 8-5	0.000	0.000	(\$7,434,230)	(\$7,434,230)
232	960	FHM - Medical Care	C-A-7031	Provides funding to reflect a redistribution of funding within the Fund for a Healthy Maine.	A redirection of resources among the various programs within the Fund for a Healthy Maine will direct additional funding to the FHM - Medical Care program, and will allow for a reduction in General Fund resources for the Medical Care Payments to Providers program.		FHM	Fund for a Healthy Maine	1	14400	IN 8-5	0.000	0.000	\$17,702,706	\$17,666,348
233	921	Fund for a Healthy Maine		Extends the \$4,500,000 cap on transfers from net slot machine revenue to the FHM though the fiscal year ending June 30, 2013.		<i>Language Part II-1</i>	FHM	General Fund	1		IN 8-5	0.000	0.000	\$0	(\$1,101,895)
234	921	Fund for a Healthy Maine		Extends the \$4,500,000 cap on transfers from net slot machine revenue to the FHM though the fiscal year ending June 30, 2013.		<i>Language Part II-1</i>	FHM	Fund for a Healthy Maine	1		IN 8-5	0.000	0.000	\$0	\$1,101,895
235	921	Fund for a Healthy Maine		Repeals language requiring the transfer of funding from the FHM to offset the General Fund revenue loss associated with limiting the sale of certain flavored cigars and cigarettes.		<i>Language Part II-3</i>	FHM	General Fund	1		IN	0.000	0.000	\$161,786	\$164,751

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261	921	Fund for a Healthy Maine		Repeals language requiring the transfer of funding from the FHM to offset the General Fund revenue loss associated with limiting the sale of certain flavored cigars and cigarettes.		Language Part II-3	FHM	Fund for a Healthy Maine	1		IN	0.000	0.000	(\$161,786)	(\$164,751)
267	129	Bureau of Medical Services	C-A-7009	Provides funding for the implementation and operation of new standards that regulate the electronic transmission of specific health care transactions.	This initiative is critical in order for the State to become compliant with the Centers for Medicare and Medicaid Services standards regarding the transition to the new standard for HIPAA covered transactions and the change from ICD-9 to ICD-10 for medical diagnosis and inpatient procedure coding.	See item below.	MaineCare Admin	General Fund	1	11630	IN	0.000	0.000	\$699,382	\$346,194
268	129	Bureau of Medical Services	C-A-7009	Provides funding for the implementation and operation of new standards that regulate the electronic transmission of specific health care transactions.	This initiative is critical in order for the State to become compliant with the Centers for Medicare and Medicaid Services standards regarding the transition to the new standard for HIPAA covered transactions and the change from ICD-9 to ICD-10 for medical diagnosis and inpatient procedure coding.	See item above.	MaineCare Admin	Federal Expend. Fund	1	11640	IN	0.000	0.000	\$6,444,686	\$3,190,120
269	129	Bureau of Medical Services	C-A-7011	Provides funding for the implementation and operation of health information technology incentive payments.	This initiative provides the 10% state share of funding for the administration of the health information technology incentive payment program. This program provides incentive payments to Maine providers to implement or enhance their electronic health records. The incentive payments are 100% funded by the American Recovery and Reinvestment Act of 2009.	See item below. Info requested on length of possible ARRA or ACA funding, incentive payments and meaningful use.	MaineCare Admin	General Fund	1	11650	IN	0.000	0.000	\$219,382	\$164,382
270	129	Bureau of Medical Services	C-A-7011	Provides funding for the implementation and operation of health information technology incentive payments.	This initiative provides the 10% state share of funding for the administration of the health information technology incentive payment program. This program provides incentive payments to Maine providers to implement or enhance their electronic health records. The incentive payments are 100% funded by the American Recovery and Reinvestment Act of 2009.	See item above.	MaineCare Admin	Federal Expend. Fund ARRA	3	11660	IN	0.000	0.000	\$1,974,438	\$1,479,438
289	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.	MaineCare Baseline Adjustment	General Fund	1	12790	T CP	0.000	0.000	\$74,446,764	\$71,287,576

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290	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. Info requested on causes of spending growth (Utilization and caseload? Cost pmpm?), comparison of spending in coming biennium and prior biennia, details of increased GF spending in coming biennium. Info requested on options for controlling costs thru managed care. Info requested on Language QQ and hospital settlements. Info requested on sufficiency of budget. Info requested on loss of federal matching funds. Info requested on hospital DRG and APC implementation and impact. Info requested on baseline calculation for MAP account, broken down. See item below.</i>	MaineCare Baseline Adjustment	Federal Expend. Fund	1	12800	T CP	0.000	0.000	\$157,567,470	\$152,871,216
291	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. See item above.</i>	MaineCare Baseline Adjustment	Federal Block Grant Fund	1	12810	T CP	0.000	0.000	\$2,409,251	\$2,409,251

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292	147	Medical Care - Payments to Providers	C-A-1198	Reduces funding by changing the disability determination cutoff from 45 days to 90 days.	A court decision in the '70s required that a disability determination be made in 45 days. After 45 days, the person becomes eligible for temporary coverage which is 100% state-funded. In the '80s, the federal law required the decision in 90 days and then required temporary coverage. This initiative reflects the savings from requiring that the determination be made in 90 days to mirror federal law.	<i>Request information on savings assumptions and impact on 2012 savings from not including in PL 2011, c.1. See Language RR. Info needed on pilot project in FY11, staff, cost, effect, savings, possible use in future biennia (costs and savings). Info requested on cost and savings assumptions, cost shift assumptions. HHS Committee majority amendment modifies to expand current demo to add 9 staff to achieve net savings of approx. \$4,100,000 in FY 12 and \$4,900,000 in FY 13.</i>	MaineCare Eligibility/ Recipients	General Fund	1	12770	AMD 8-5	0.000	0.000	(\$3,000,000)	(\$6,000,000)
293	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	<i>Funding flow with Dirigo. Info needed on MOE requirements of ACA, likelihood of approval by CMS, possibility of delay, impact on savings in biennium. Info requested on eligibility level compared to other states, quantify loss of federal funds, impact of freeze on others (providers and insurers). Info requested on rationale for increasing eligibility to 200%, results. Info needed on impact on Medicare Buy-In, impacting 25,000 persons.</i>	MaineCare Eligibility/ Recipients	General Fund	1	12950	IN 8-5	0.000	0.000	(\$2,578,166)	(\$5,916,288)
294	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	<i>See item above.</i>	MaineCare Eligibility/ Recipients	Federal Expend. Fund	1	12960	IN 8-5	0.000	0.000	(\$6,212,362)	(\$12,275,152)
295	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	<i>See item above.</i>	MaineCare Eligibility/ Recipients	Other Special Rev. Funds	3	12970	IN 8-5	0.000	0.000	(\$1,008,150)	(\$1,209,780)

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296	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Allowed by ACA MOE? See Item 200 above on 4% premium. CP to amend initiative.</i>	MaineCare Eligibility/Recipients	General Fund	1	12980	T CP	0.000	0.000	(\$1,589,424)	(\$1,589,424)
297	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Allowed by ACA MOE? See Item 200 above on 4% premium.</i>	MaineCare Eligibility/Recipients	Federal Expend. Fund	1	12990	T CP	0.000	0.000	(\$231,316)	(\$230,025)
298	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Allowed by ACA MOE? See Item 200 above on 4% premium.</i>	MaineCare Eligibility/Recipients	Federal Block Grant Fund	1	13000	T CP	0.000	0.000	(\$4,226,735)	(\$4,206,842)
299	147	Medical Care - Payments to Providers	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	<i>Request info on current spending - RAC codes and account coding. See Language KK. Info requested on immigration status of Maine residents (categories), health and other public assistance. Info requested on cut proposals in budget, effect on people, secondary effects on other eligibility, other people, municipalities, programs. Info requested on what other states provide for legal non-citizen residents. CP to revise savings assumption to \$2.6 million per year to maintain coverage for children and pregnant women under Medicaid (MOE).</i>	MaineCare Eligibility/Recipients	General Fund	1	13020	T CP	0.000	0.000	(\$8,825,231)	(\$8,825,231)

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300	105	Riverview Psychiatric Center	C-A-1301	Adjusts funding for Medicaid services as a result of the decrease of the Federal Medical Assistance Percentage.	This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.	<i>Info requested on provision of \$6.8b for care to most needy mentioned in Commissioner's testimony, comparison with prior, current and next biennium. Info requested on impact of loss of federal funds. Info requested on how FMAP is calculated.</i>	MaineCare FMAP	Other Special Rev. Funds	20	3170	IN	0.000	0.000	(\$458,462)	(\$508,133)
301	120	Dorothea Dix Psychiatric Center	C-A-1301	Adjusts funding for Medicaid services as a result of the decrease of the Federal Medical Assistance Percentage.	This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	Other Special Rev. Funds	25	3240	IN	0.000	0.000	(\$359,231)	(\$401,464)
302	733	Disproportionate Share - Riverview Psychiatric Center	C-A-1301	Adjusts funding for Medicaid services as a result of the decrease of the Federal Medical Assistance Percentage.	This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	10	3900	IN	0.000	0.000	\$458,462	\$508,133
303	734	Disproportionate Share - Dorothea Dix Psychiatric Center	C-A-1301	Adjusts funding for Medicaid services as a result of the decrease of the Federal Medical Assistance Percentage.	This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	15	3940	IN	0.000	0.000	\$359,231	\$401,464
304	705	Medicaid Services - Developmental Services	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	12	3660	IN	0.000	0.000	\$863,941	\$936,049

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305	731	Mental Health Services - Child Medicaid	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	17	3760	IN	0.000	0.000	\$993,788	\$1,076,734
306	732	Mental Health Services - Community Medicaid	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	14	3840	IN	0.000	0.000	\$1,877,661	\$2,034,379
307	844	Office of Substance Abuse - Medicaid Seed	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	4000	IN	0.000	0.000	\$152,996	\$165,766

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308	987	Developmental Services Waiver - MaineCare	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	16	4140	IN	0.000	0.000	\$4,298,131	\$4,656,873
309	Z006	Developmental Services Waiver - Supports	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	4180	IN	0.000	0.000	\$277,887	\$301,081
310	Z042	Traumatic Brain Injury Seed	C-A-1478	Provides funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	PL 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY12 and FY13. The amounts added back to each appropriation bring the underlying (hold harmless) State Share to 35.01%. This initiative reflects the amount of state share required to maintain current services based on the FMAP rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	4240	IN	0.000	0.000	\$5,170	\$5,601

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311	137	IV-E Foster Care/Adoption Assistance	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	11830	IN	0.000	0.000	\$514,928	\$558,082
312	137	IV-E Foster Care/Adoption Assistance	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	Federal Expend. Fund	1	11840	IN	0.000	0.000	(\$714,637)	(\$759,251)
313	139	State-funded Foster Care/Adoption Assistance	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	12030	IN	0.000	0.000	\$55,731	\$60,382

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314	147	Medical Care - Payments to Providers	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	12860	IN	0.000	0.000	\$17,060,329	\$18,460,893
315	147	Medical Care - Payments to Providers	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	Federal Expend. Fund	1	12870	IN	0.000	0.000	(\$25,999,163)	(\$28,145,802)
316	148	Nursing Facilities	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	General Fund	1	13070	IN	0.000	0.000	\$4,600,374	\$4,984,343

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317	148	Nursing Facilities	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	Federal Expend. Fund	1	13080	IN	0.000	0.000	(\$4,600,374)	(\$4,984,343)
318	307	Bureau of Child and Family Services - Central	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.	FMAP?	MaineCare FMAP	General Fund	1	13540	IN	0.000	0.000	\$62,249	\$69,184
319	307	Bureau of Child and Family Services - Central	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.	FMAP?	MaineCare FMAP	Federal Expend. Fund	1	13550	IN	0.000	0.000	(\$86,392)	(\$94,122)

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320	960	FHM - Medical Care	C-A-1478	Adjusts funding for Medicaid services as the result of a decrease of the Federal Medical Assistance Percentage.	Public Law 2009, c.213 and c.571 included initiatives recording enhanced federal participation for most Medicaid payments enacted as part of the American Recovery and Reinvestment Act. Recognizing that those were one-time deappropriations, the amounts have been added back to the baseline budgets for FY 12 and FY 13. The amounts added back to each appropriation bring the underlying (hold harmless) State share to 35.01%. This initiative provides funding for the state share required to maintain current services based on the Federal Medical Assistance Percentage (FMAP) rate for Federal Fiscal Year 2011 at 63.8% and Federal Fiscal Year 2012 at 63.27%.		MaineCare FMAP	Fund for a Healthy Maine	1	14390	IN	0.000	0.000	\$356,500	\$386,255
321	147	Medical Care - Payments to Providers	C-A-7032	Reduces funding that is available as the result of a redistribution of resources within the Fund for a Healthy Maine.	Resources within the Fund for a Healthy Maine have been redistributed with a greater share being allocated to the FHM - Medical Care program, allowing for a deappropriation from the Medical Care - Payments to Providers program, General Fund account.	Reduction offset by increased FHM allocation.	MaineCare Other	General Fund	1	13010	IN 8-5	0.000	0.000	(\$17,705,645)	(\$17,684,183)
322	122	Developmental Services - Community	C-A-1193	Transfers funding from the Medical Care - Payments to Providers program to the Long Term Care - Human Services program and the Developmental Services - Community program based on the unbundling of rates as required by the Maine Integrated Health Management Solution (MIHMS) system.	This initiative transfers funding from the Medical Care - Payments to Providers program to the Developmental Disabilities - Community program and the Long Term Care - Human Services program in order to fund contracts. As rates were unbundled, it was determined that a portion of the rate was administrative in nature and should be paid for via contract and reimbursable with Medicaid administrative match.		MaineCare Providers	General Fund	60	3380	IN	0.000	0.000	\$171,000	\$171,000
323	129	Bureau of Medical Services	C-A-1193	Transfers funding from the Medical Care - Payments to Providers program to the Long Term Care - Human Services program and the Developmental Services - Community program based on the unbundling of rates as required by the Maine Integrated Health Management Solution (MIHMS) system.	This initiative transfers funding from the Medical Care - Payment to Providers program to the Home Based Care account and to the Developmental Services - Community program in order to fund contracts. As rates were unbundled, it was determined that a portion of the rate was administrative in nature and should be paid for via contract and reimbursable with Medicaid administrative match.		MaineCare Providers	Federal Expend. Fund	1	11570	IN	0.000	0.000	\$310,632	\$310,632

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324	147	Medical Care - Payments to Providers	C-A-1193	Transfers funding from the Medical Care - Payments to Providers program to the Long Term Care - Human Services program and the Developmental Services - Community program based on the unbundling of rates as required by the Maine Integrated Health Management Solution (MIHMS) system.	This initiative transfers funding from the Medical Care - Payment to Providers program to the Home Based Care account and to the Developmental Services - Community program in order to fund contracts. As rates were unbundled, it was determined that a portion of the rate was administrative in nature and should be paid for via contract and reimbursable with Medicaid administrative match.		MaineCare Providers	General Fund	1	12740	IN	0.000	0.000	(\$310,632)	(\$310,632)
325	147	Medical Care - Payments to Providers	C-A-1193	Transfers funding from the Medical Care - Payments to Providers program to the Long Term Care - Human Services program and the Developmental Services - Community program based on the unbundling of rates as required by the Maine Integrated Health Management Solution (MIHMS) system.	This initiative transfers funding from the Medical Care - Payment to Providers program to the Home Based Care account and to the Developmental Services - Community program in order to fund contracts. As rates were unbundled, it was determined that a portion of the rate was administrative in nature and should be paid for via contract and reimbursable with Medicaid administrative match.		MaineCare Providers	Federal Expend. Fund	1	12750	IN	0.000	0.000	(\$310,632)	(\$310,632)
326	420	Long Term Care - Human Services	C-A-1193	Transfers funding from the Medical Care - Payments to Providers program to the Long Term Care - Human Services program and the Developmental Services - Community program based on the unbundling of rates as required by the Maine Integrated Health Management Solution (MIHMS) system.	This initiative transfers funding from the Medical Care - Payment to Providers program to the Home Based Care account and to the Developmental Services - Community program in order to fund contracts. As rates were unbundled, it was determined that a portion of the rate was administrative in nature and should be paid for via contract and reimbursable with Medicaid administrative match.		MaineCare Providers	General Fund	1	13600	IN	0.000	0.000	\$139,632	\$139,632
327	731	Mental Health Services - Child Medicaid	C-A-1196	Adjusts funding to distribute a portion of the funding provided to adjust and restore MaineCare rates for services that were subject to a 10% reduction in accordance with Public Law 2009, chapter 571, Part RRRR.	This initiative distributes a portion of the funding made available in PL 2009, c.571, Part RRRR to adjust and restore rates for services that were subject to the 10% reduction to actuarially based rates.	<i>Implements in FY12 and 13 the adjustment in MaineCare rates enacted in PL 2009, chapter 571, Part RRRR.</i>	MaineCare Providers	General Fund	17	3730	IN	0.000	0.000	\$537,530	\$537,530
328	Z006	Developmental Services Waiver - Supports	C-A-1196	Adjusts funding to distribute a portion of the funding provided to adjust and restore MaineCare rates for services that were subject to a 10% reduction in accordance with Public Law 2009, chapter 571, Part RRRR.	This initiative distributes a portion of the funding made available in PL 2009, c.571, Part RRRR to adjust and restore rates for services that were subject to the 10% reduction to actuarially based rates.	<i>See item above.</i>	MaineCare Providers	General Fund	1	4170	IN	0.000	0.000	\$290,523	\$290,523

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329	147	Medical Care - Payments to Providers	C-A-1196	Adjusts funding to distribute a portion of the funding provided to adjust and restore MaineCare rates for services that were subject to a 10% reduction in accordance with Public Law 2009, chapter 571, Part RRRR.	This initiative distributes a portion of the funding made available in PL 2009, c.571, Part RRRR to adjust and restore rates for services that were subject to the 10% reduction to actuarially based rates.	See item above.	MaineCare Providers	General Fund	1	12760	IN	0.000	0.000	(\$828,053)	(\$828,053)
330	731	Mental Health Services - Child Medicaid	C-A-1199	Transfers funding for interpretation and translation services from the Mental Health Services - Child Medicaid program and the Mental Health Services - Community Medicaid program to the Medical Care - Payments to Providers program.	This initiative transfers funding for interpretation and translation services from various MaineCare medical services accounts to the Medical Care - Payments to Providers program. Per federal regulations, these services are allowable as an administrative expense at a higher federal participation rate (75%). Currently the interpretation and translation service expenditure charges to the same account as the main service being provided. Moving the expenditures to one account will allow the department to better track and report the expenditures in order to receive the higher match rate.	See item below.	MaineCare Providers	General Fund	17	3740	IN	0.000	0.000	(\$31,890)	(\$31,890)
331	732	Mental Health Services - Community Medicaid	C-A-1199	Transfers funding for interpretation and translation services from the Mental Health Services - Child Medicaid program and the Mental Health Services - Community Medicaid program to the Medical Care - Payments to Providers program.	This initiative transfers funding for interpretation and translation services from various MaineCare medical services accounts to the Medical Care - Payments to Providers program. Per federal regulations, these services are allowable as an administrative expense at a higher federal participation rate (75%). Currently the interpretation and translation service expenditure charges to the same account as the main service being provided. Moving the expenditures to one account will allow the department to better track and report the expenditures in order to receive the higher match rate.	See item above.	MaineCare Providers	General Fund	14	3820	IN	0.000	0.000	(\$6,375)	(\$6,375)
332	147	Medical Care - Payments to Providers	C-A-1199	Transfers funding for interpretation and translation services from the Mental Health Services - Child Medicaid program and the Mental Health Services - Community Medicaid program to the Medical Care - Payments to Providers program.	This initiative transfers funding for interpretation and translation services from various MaineCare medical services accounts to the Medical Care - Payments to Providers program. Per federal regulations, these services are allowable as an administrative expense at a higher federal participation rate (75%). Currently the interpretation and translation service expenditure charges to the same account as the main service being provided. Moving the expenditures to one account will allow the department to better track and report the expenditures in order to receive the higher match rate.	See item above.	MaineCare Providers	General Fund	1	12780	IN	0.000	0.000	\$38,265	\$38,265

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333	731	Mental Health Services - Child Medicaid	C-A-1407	Adjusts funding related to the rate reduction for outpatient services under the MaineCare Benefits Manual, Chapters II and III, Section 65, Behavioral Health Services included in Public Law 2009, chapter 571.	This initiative corrects the distribution of savings related to the rate reduction for Section 65 Outpatient Services included in PL 2009, c.571.	See item below.	MaineCare Providers	General Fund	17	3750	IN	0.000	0.000	(\$343,401)	(\$343,401)
334	732	Mental Health Services - Community Medicaid	C-A-1407	Adjusts funding related to the rate reduction for outpatient services under the MaineCare Benefits Manual, Chapters II and III, Section 65, Behavioral Health Services included in Public Law 2009, chapter 571.	This initiative corrects the distribution of savings related to the rate reduction for Section 65 Outpatient Services included in PL 2009, c.571.	See item above.	MaineCare Providers	General Fund	14	3830	IN	0.000	0.000	\$451,719	\$451,719
335	844	Office of Substance Abuse - Medicaid Seed	C-A-1407	Adjusts funding related to the rate reduction for outpatient services under the MaineCare Benefits Manual, Chapters II and III, Section 65, Behavioral Health Services included in Public Law 2009, chapter 571.	This initiative corrects the distribution of savings related to the rate reduction for Section 65 Outpatient Services included in PL 2009, c.571.	See item above.	MaineCare Providers	General Fund	1	3990	IN	0.000	0.000	(\$108,318)	(\$108,318)
336	147	Medical Care - Payments to Providers	C-A-1410	Provides funding to offset the loss of supplemental rebates due to the federal Patient Protection and Affordable Care Act.	The Patient Protection and Affordable Care Act increases the minimum rebate percentage from 15.1% to 23.1% of the average manufacturer price (AMP) and the minimum rebate percentage for generic drugs from 11% to 13% of AMP. The increases apply to rebate periods after December 31, 2009. The increases in the rebates go solely to the federal government, and the Secretary of the United States Department of Health and Human Services is instructed to reduce payments to the states by the amount of the increase in the minimum rebate amount. The amount of the reduction is to be "estimated by the Secretary based on utilization and other data." The payment reduction "shall be deemed an overpayment" that will be disallowed against the states' regular quarterly draw and is "not subject to reconsideration" before the federal Departmental Appeals Board. This change results in a loss of rebates to the State of Maine.		MaineCare Providers	General Fund	1	12820	IN	0.000	0.000	\$6,885,095	\$5,671,918

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337	147	Medical Care - Payments to Providers	C-A-1410	Provides funding to offset the loss of supplemental rebates due to the federal Patient Protection and Affordable Care Act.	The Patient Protection and Affordable Care Act increases the minimum rebate percentage from 15.1% to 23.1% of the average manufacturer price (AMP) and the minimum rebate percentage for generic drugs from 11% to 13% of AMP. The increases apply to rebate periods after December 31, 2009. The increases in the rebates go solely to the federal government, and the Secretary of the United States Department of Health and Human Services is instructed to reduce payments to the states by the amount of the increase in the minimum rebate amount. The amount of the reduction is to be "estimated by the Secretary based on utilization and other data." The payment reduction "shall be deemed an overpayment" that will be disallowed against the states' regular quarterly draw and is "not subject to reconsideration" before the federal Departmental Appeals Board. This change results in a loss of rebates to the State of Maine.		MaineCare Providers	Other Special Rev. Funds	5	12830	IN	0.000	0.000	(\$6,885,095)	(\$5,671,918)
338	147	Medical Care - Payments to Providers	C-A-1445	Provides funding to continue the patient-centered medical home incentive payment program.	This initiative is designed to encourage Maine providers to provide better access to primary care physician services for MaineCare members. This funding will provide an enhanced per member per month incentive payment for access to primary care services.	<i>Need info on current incentives for primary care providers. See item below.</i>	MaineCare Providers	General Fund	1	12840	IN	0.000	0.000	\$611,797	\$646,920
339	147	Medical Care - Payments to Providers	C-A-1445	Provides funding to continue the patient-centered medical home incentive payment program.	This initiative is designed to encourage Maine providers to provide better access to primary care physician services for MaineCare members. This funding will provide an enhanced per member per month incentive payment for access to primary care services.	<i>See item above.</i>	MaineCare Providers	Federal Expend. Fund	1	12850	IN	0.000	0.000	\$1,059,780	\$1,114,365
340	147	Medical Care - Payments to Providers	C-A-1490	Provides funding to the Medical Care - Payments to Providers program for Medicare Part B payments, which is offset by reducing funding for the Low-cost Drugs To Maine's Elderly program.	This initiative reduces funding for Medicare Part D. Growth in the Qualified Medicare Beneficiary program (QMB) and Specified Low-Income Medicare Beneficiary program (SLMB) means less Medicare Part D funding is required while more is needed for Medicare Part B payments to the Centers for Medicare and Medicaid Services.	<i>See item below. Relationship to FHM-DEL reduction and Part AAA language.</i>	MaineCare Providers	General Fund	1	12880	IN	0.000	0.000	\$500,000	\$500,000
341	202	Low-cost Drugs To Maine's Elderly	C-A-1490	Provides funding to the Medical Care - Payments to Providers program for Medicare Part B payments, which is offset by reducing funding for the Low-cost Drugs To Maine's Elderly program.	This initiative reduces funding for Medicare Part D. Growth in the Qualified Medicare Beneficiary program (QMB) and Specified Low-Income Medicare Beneficiary program (SLMB) means less Medicare Part D funding is required while more is needed for Medicare Part B payments to the Centers for Medicare and Medicaid Services.	<i>See item above.</i>	MaineCare Providers	General Fund	1	13260	IN	0.000	0.000	(\$500,000)	(\$500,000)

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342	705	Medicaid Services - Developmental Services	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	General Fund	12	3680	IN	0.000	0.000	(\$375,005)	(\$375,005)
343	705	Medicaid Services - Developmental Services	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	42	3690	IN	0.000	0.000	(\$56,630)	(\$56,630)
344	705	Medicaid Services - Developmental Services	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	52	3700	IN	0.000	0.000	\$125,916	\$125,916
345	732	Mental Health Services - Community Medicaid	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	General Fund	14	3850	IN	0.000	0.000	(\$166,228)	(\$166,228)
346	732	Mental Health Services - Community Medicaid	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	44	3860	IN	0.000	0.000	(\$146,825)	(\$146,825)
347	732	Mental Health Services - Community Medicaid	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	46	3870	IN	0.000	0.000	\$313,053	\$313,053
348	844	Office of Substance Abuse - Medicaid Seed	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	General Fund	1	4020	IN	0.000	0.000	\$21,763	\$21,763

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349	844	Office of Substance Abuse - Medicaid Seed	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	1	4030	IN	0.000	0.000	(\$21,763)	(\$21,763)
350	978	Residential Treatment Facilities Assessment	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds and General Fund accounts as necessary.	HHS Committee considering amendment to increase rate to 6%	MaineCare Taxes	Other Special Rev. Funds	1	4110	IN	0.000	0.000	\$305,719	\$305,719
351	147	Medical Care - Payments to Providers	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds accounts as necessary.		MaineCare Taxes	General Fund	1	12890	IN	0.000	0.000	\$379,606	\$379,606
352	147	Medical Care - Payments to Providers	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds accounts as necessary.		MaineCare Taxes	Other Special Rev. Funds	1	12900	IN	0.000	0.000	(\$379,606)	(\$379,606)
353	148	Nursing Facilities	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds accounts as necessary.		MaineCare Taxes	General Fund	1	13090	IN	0.000	0.000	(\$2,240,543)	(\$2,240,543)
354	148	Nursing Facilities	C-A-7015	Adjusts funding in the various MaineCare accounts to reflect modifications to projections of MaineCare-dedicated tax revenues to comport with Revenue Forecasting Committee rejections.	The Revenue Forecasting Committee reprojected the revenue of the nursing facilities tax and several of the service provider taxes at its November 2010 meeting. This initiative adjusts the applicable Other Special Revenue Funds accounts as necessary.	HHS Committee considering amendment to increase rate to 6%	MaineCare Taxes	Other Special Rev. Funds	2	13100	IN	0.000	0.000	\$2,240,543	\$2,240,543
356	208	Disability Determination - Division of	C-A-1504	Provides funding necessary due to an increase in applications for benefits.	Federal Social Security Administration is providing additional federal funding to cover additional workload due to an increase in SSA applications.		Public Assistance	Federal Expend. Fund	1	13340	IN	0.000	0.000	\$1,015,791	\$1,015,791

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357	131	State Supplement to Federal Supplemental Security Income	C-A-7017	Reduces funding no longer required to meet expenditure requirements of the 2012-2013 biennium.	Based on current expenditure trends, savings in this account can be achieved in the current biennium.		Public Assistance	General Fund	1	11740	IN	0.000	0.000	(\$700,000)	(\$480,000)
358	130	General Assistance - Reimbursement to Cities and Towns	C-A-7026	Reduces funding by reducing the level of reimbursement to municipalities.	When a municipality incurs net general assistance costs that exceed .0003 of its most recent state valuation, the department is required to reimburse the municipality for 90% of the excess amount. This initiative reduces the reimbursement to 75% of the excess amount.	<i>See Language JJ. Info requested on primary cost drivers and demand, on state program audits, on basis for calculating costs and savings, on eligibility, on abandonment of resources criteria and process for determining good cause for abandonment, on municipalities exceeding .0003 of state valuation threshold for increased reimbursement rate, on costs of administration statewide. Info requested on state employee retirees receiving GA and other state program assistance.</i>	Public Assistance	General Fund	1	11710	OUT 7-6	0.000	0.000	(\$701,250)	(\$701,250)
359	131	State Supplement to Federal Supplemental Security Income	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	<i>See item below. See Language KK. Info needed on effect of cuts, effects on municipalities, other services, people. Info needed on # people. See MaineCare Eligibility, Medical Care - MAP, Item 299.</i>	Public Assistance	General Fund	1	11750	IN 8-5	0.000	0.000	(\$367,900)	(\$367,900)
360	138	Temporary Assistance for Needy Families	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	<i>See item above.</i>	Public Assistance	General Fund	1	11910	IN 8-5	0.000	0.000	(\$157,320)	(\$157,320)
361	Z019	Food Supplement Administration	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	<i>See item above. Info requested on SNAP (food stamp) caseload from 2002 to 2011, breaking out children and adults.</i>	Public Assistance	General Fund	1	14600	IN 8-5	0.000	0.000	(\$420,000)	(\$420,000)

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362	138	Temporary Assistance for Needy Families	C-A-7035	Reduces funding for Temporary Assistance for Needy Families assistance for individuals convicted of drug-related felonies.	Convicted drug felons will be required to submit proof of regular drug testing to be eligible for assistance under the TANF program. Failure to provide such proof or a positive drug test will result in immediate termination of assistance.	<i>See Language LL. Info requested on cost of testing, who will bear cost, accuracy of testing, what do other states do. Question raised about what means states legally use and what is cost effective in drug testing for recipients of assistance.</i>	Public Assistance	General Fund	1	11920	IN 8-5	0.000	0.000	(\$50,000)	(\$50,000)
363	138	Temporary Assistance for Needy Families	C-A-7036	Reduces funding by implementing a full-family sanction for violation of program rules.	This initiative will achieve savings in the Temporary Assistance for Needy Families program by requiring participants to sign and comply with the family contract as a condition for eligibility in the program.	<i>See Language PP. Info requested on TANF and GA sanctions, history of sanction results, and for what noncompliance, history of appeals and results. CP to reallocate second year savings.</i>	Public Assistance	General Fund	1	11930	T CP	0.000	0.000	(\$1,250,000)	(\$2,500,000)
364	138	Temporary Assistance for Needy Families	C-A-7037	Reduces funding by implementing a strict 5-year time limit for recipients of assistance under the Temporary Assistance for Needy Families program.	This initiative reflects the savings associated with implementing a strict 5-year time limit for the TANF program. Individuals who are already at or over the 5-year limit on July 1, 2011 will have a 60 month grace period before their case is closed.	<i>See Language PP. One time savings? MOE implications? Info requested on other states' limits, strict and flexible limits, data on calculation of savings. Info requested on profiles, explanations for exceeding 60 months, # recipients with disabled children. Info requested on MOE requirements, process of calculating. CP to reallocate second year savings.</i>	Public Assistance	General Fund	1	11940	T CP	0.000	0.000	(\$1,250,000)	\$0
387	Z008	Maternal and Child Health Block Grant Match	C-A-1409	Reduces funding for recruitment and outreach in the Maine breast and cervical health program.	Reduces funding for recruitment and outreach in the Maine Breast and Cervical Health Program (BCHP). This money was dedicated to funding six contracts with community agencies to conduct BCHP recruitment and outreach. Current emphasis of BCHP is now on increasing screenings, and contract functions are no longer meeting the program needs. Contracts were terminated 6/29/2010 and no plans are in place to renew them.	<i>Info requested on impact of carrying forward the curtailments from FY11. Info requested on impact of this cut, whether outreach services are needed, whether ending contracts for outreach represents a change of direction or philosophy.</i>	Public Health	General Fund	1	14480	IN 7-6	0.000	0.000	(\$60,000)	(\$60,000)
388	Z008	Maternal and Child Health Block Grant Match	C-A-1413	Reduces funding for specialty medical foods for both children and adults with inborn errors of metabolism.	This program pays for specialty medical foods for both children and adults with inborn errors of metabolism. The department proposes to pay for these expenditures from the Other Special Revenue Funds account related to the Newborn Bloodspot Program.		Public Health	General Fund	1	14490	IN	0.000	0.000	(\$60,000)	(\$60,000)

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389	487	Hypertension Control	C-A-1501	Provides funding to align allocations with existing resources.	Changing grant objectives have led to the allocation of additional grant dollars towards hypertension initiatives. Current funding in this program is insufficient to meet the needs of the grant. This change will eliminate the need to request financial orders.		Public Health	Federal Block Grant Fund	1	13850	IN	0.000	0.000	\$30,000	\$30,000
390	Z069	Breast Cancer Services Special Program Fund	C-A-1510	Provides funding to align allocations with current resources.	This fund was created to receive revenue from a specialty license plate. The allocation levels are insufficient and this will eliminate the need to request additional allotment through financial orders.		Public Health	Other Special Rev. Funds	1	15220	IN	0.000	0.000	\$111,528	\$111,528
426	679	Office of Substance Abuse	C-A-1483	Reduces funding to align allocations with current resources.	This initiative reduces the funding in a program for which the federal grant ends on 9/30/10.		Substance Abuse	Federal Expend. Fund	1	3540	IN	0.000	0.000	(\$2,648,190)	(\$2,648,190)
427	700	Driver Education and Evaluation Program - Substance Abuse	C-A-7001	Reduces funding to ensure that annual appropriations do not exceed \$1,700,000 in accordance with the provisions of the Maine Revised Statutes, Title 5, section 20072-A.	Maine statute limits General Fund appropriations for the Driver Education and Evaluation Programs to \$1,700,000 per year. This initiative reduces funding for the program to meet that level.	<i>Info needed on program use and finances and projections for FY12 and 13.</i>	Substance Abuse	General Fund	1	3610	IN	0.000	0.000	(\$42,248)	(\$67,309)
428	679	Office of Substance Abuse	C-A-7002	Adjusts allocations to align with current resources.	Reduces funding as the result of the end of federal grant funding provided to this account by the Department of Education.		Substance Abuse	Federal Expend. Fund	2	3545	IN	0.000	0.000	(\$1,449,000)	(\$1,449,000)
429	844	Office of Substance Abuse - Medicaid Seed	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline and adjustment details. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Substance Abuse	General Fund	1	4010	T CP	0.000	0.000	\$384,458	\$384,458
430	679	Office of Substance Abuse	C-A-7014	Provides funding for gambling addiction analysis, prevention and treatment services.	This initiative implements PL 2009, chapter 622 which redirects funding from racino proceeds to the Office of Substance Abuse for gambling addiction analysis, prevention and treatment services. The funding level for the 2012-2013 biennium is \$50,000 per year. Beginning with fiscal year 2013-14 the funding level increases to \$100,000 annually.	<i>Info needed on use of funds in FY10 and FY11, projected use in FY12 and FY13.</i>	Substance Abuse	Other Special Rev. Funds	3	3580	IN	0.000	0.000	\$50,000	\$50,000

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Language															
Group B															
440	UU			Directs DHHS to pay child care at 50% of the 75 th percentile of local market rates effective 10/1/2011.		See Children's Services, Purchased Social Services, Item 28.					T CP				
Group E															
441	SS			Repeals Maine RxPlus program.		See Elder Services, Maine Rx Plus Program, Item 196. Committee amendment to achieve proposed savings by establishing a fee to replace GF appropriation.					AMD				
442	MM			Directs DHHS to amend asset transfer rules for long-term care for state-funded assistance in certain board home settings, per Title 22, section 3174-A.		See Elder Services, MR/Elderly PNMI Room and Board, Item 199.					IN 12-1				
Group G															
443	NN			DHHS directed to convene working group to develop a plan and implementing legislation regarding the future role and structure of DDPC effective 6/30/12. AFA and HHS Committees to submit legislation to implement the plan in Second Regular Session, 2012.		See Adult Mental Health, Dispro Share, DDPC, Item 4. Committee Amendment to change composition of the working group.					AMD				
Group H															
444	WW			Extend Controlled Substances Prescription Monitoring Program to any controlled substance dispensed by a dispenser or prescriber.		Info requested on computerized systems provide for communication between pharmacies about patients and situation in which the person uses MaineCare coverage at one pharmacy and pays cash at another. And see YY below. Will be removed in CP					T CP				
445	YY			Prohibits a MaineCare member from paying with cash for a prescription drug that is covered by MaineCare.		See WW above. Will be amended in CP					T CP				
Group I															
446	JJ			Limits eligibility for General Assistance to 1 1-month period per year. Changes reimbursement rate for municipalities who incur net GA costs over .03% of state valuation from 90% state match to 75% state match. Amends provision on reporting to State. Increases period of ineligibility for false representation of a material fact and for failure to comply with a work requirement from 120 to 180 days. Extends requirement to secure potential resources to Maine residents Property Tax Program. Amends period of ineligibility for failure to secure potential resource from "until makes good faith effort to secure the resource" to "120 days from date applicant abandons the resource." Extends period of ineligibility due to ineligibility for another program for "period of other program ineligibility" to "that period or 180 days, whichever is longer." Directs DHHS to work with municipalities to enhance their ability to determine eligibility.		Initiative on GA eligibility 1x/yr withdrawn at PH. On other initiatives, see Public Assistance, GA, Item 358. Will be amended in CP.					T CP				
447	RR			Extends period of time for DHHS to determine eligibility for assistance based on disability from 45 to 90 days. Requires issuance of temporary medical card at day 91. In other cases provides for temporary medical card at day 46.		See MaineCare Eligibility, Medical Care-Payments to Providers, Item 292.					IN 8-5				

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448	KK			Repeals DHHS food supplement program for legal noncitizens. Repeals DHHS supplemental security income for legal noncitizens. Repeals DHHS discretion to provide medical and financial assistance to persons who would be eligible for TANF or MaineCare but for their citizenship status.		See Public Assistance, State Supplement, Item 359, TANF, Item 360, Food Supplement Admin, Item 361, and MaineCare Eligibility, Medical Care-MAP, Item 299.					IN 8-5				
449	LL			Amends state law allowing TANF eligibility for a person with a drug-related felony, adding a requirement of submitting proof of regular drug testing with disqualification		See Public Assistance, TANF, Item 362.					IN 8-5				
450	PP			Imposes a strict 5 year limit on TANF eligibility, allowing an additional 6 months if the adults comply with all TANF participation requirements. Increases penalty for		See Public Assistance, TANF, Item 364.					T CP				
451	TT			Directs DHHS, as soon as federal Medicaid law allows, to revise the rules on the calculation of income for MaineCare eligibility purposes to use a standard 5% disregard.							IN 8-5				
452	AAA			DHHS directed to amend rules for Medicare Buy-in program to reduce income eligibility to the optional minimal levels required in federal law. DHHS directed to determine if laws need to be changed to do this, submit legislation to Second Regular		See Items 231 and 340.					IN 8-5				
			Group J												
453	XX			Revisor directed to change name of MaineCare to Medicaid.		Info requested on reasoning behind the initiative.					IN 7-6				
454	OO			Directs DHHS and AG's Office to explore opportunities for collaboration and improvements to fraud detection and referral process and potential savings.		Info requested on reasoning for this initiative.					IN				
455	ZZ			Authorizes DHHS to adopt rules on emergency basis to implement provisions in bill without having to meet usual emergency standard "to avoid a threat to public health, safety or general welfare."		Info requested on reasoning for this initiative.					IN				
			Group K												
456	QQ			Directs State Controller to transfer at end of FY12 fiscal year up to \$25million from unappropriated surplus from GF to DHHS, Medical Care – Payments to Providers account for hospital settlement payments, after Title 5, section 1507 Contingent Account and section 1511 Loan Insurance Reserve and before Title 5, section 1536 Excess General Fund revenues cascade.		Info requested on hospital settlements and how this would this be done. Provide additional info on position in FY 12 cascade					IN				
457	VV			Extends from 2011 to 2013 provision allowing MaineCare GF balances to be transferred between accounts by financial order. Extends from 2011 to 2013 weekly and quarterly MaineCare financial reports.							IN				
			Group L												
458	II			Regarding Fund for a Healthy Maine (FHM) extends cap on racino money to FHM o \$4.5m through FY13, repeals nonsupplantation language in FHM Title 22, section 1511, repeals provision related to ban on some flavored tobacco products that requires FHM money to offset loss of tobacco tax revenues from those sales.		See FHM group, FHM-DEL, Item 231.					IN 8-5 II-1; IN 7-6 II-2; IN 13-0 II-3				
459	NN			Repeals school nurse consultant position.		See FHM group, FHM-School Nurse Consultant, Item 222.					IN 8-5				

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70	Z038	Division of Administrative Hearings	C-A-1310	Reallocates the cost of one Hearings Examiner position and one Secretary Legal position from 100% General Fund to 42% General Fund and 58% Other Special Revenue Funds and 6 Hearings Examiner positions, 2 Secretary Legal positions, one Secretary Associate Legal Supervisor position and one Public Service Manager II position from 100% Other Special Revenue Funds to 58% Other Special Revenue Funds and 42% General Fund based on the cost allocation plan. Position detail is on file with the Bureau of the Budget. □	This initiative reallocates position costs to 42% General Fund and 58% Other Special Revenue Funds within the Division of Administrative Hearings program.		DHHS Mgt.	General Fund	1	15090	IN	\$252,673	\$260,729	\$31,157	\$31,157	0.000	0.000
71	Z038	Division of Administrative Hearings	C-A-1310	Reallocates the cost of one Hearings Examiner position and one Secretary Legal position from 100% General Fund to 42% General Fund and 58% Other Special Revenue Funds and 6 Hearings Examiner positions, 2 Secretary Legal positions, one Secretary Associate Legal Supervisor position and one Public Service Manager II position from 100% Other Special Revenue Funds to 58% Other Special Revenue Funds and 42% General Fund based on the cost allocation plan. Position detail is on file with the Bureau of the Budget. □	This initiative reallocates position costs to 42% General Fund and 58% Other Special Revenue Funds within the Division of Administrative Hearings program.		DHHS Mgt.	Other Special Rev. Funds	1	15100	IN	(\$252,673)	(\$260,729)	(\$4,342)	(\$4,342)	0.000	0.000
72	Z036	Division of Licensing and Regulatory Services	C-A-1311	Reallocates funding for 105 positions to 35% General Fund and 65% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 35% General Fund and 65% Other Special Revenue Funds within the Division of Licensing and Regulatory Services program.		DHHS Mgt.	Other Special Rev. Funds	4	14980	IN	\$224,261	\$238,711	\$5,709	\$5,709	0.000	0.000

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73	Z036	Division of Licensing and Regulatory Services	C-A-1311	Reallocates funding for 105 positions to 35% General Fund and 65% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 35% General Fund and 65% Other Special Revenue Funds within the Division of Licensing and Regulatory Services program.		DHHS Mgt.	General Fund	1	14950	IN	(\$148,360)	(\$157,340)	\$115,837	\$115,837	0.000	0.000
74	Z036	Division of Licensing and Regulatory Services	C-A-1311	Reallocates funding for 105 positions to 35% General Fund and 65% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 35% General Fund and 65% Other Special Revenue Funds within the Division of Licensing and Regulatory Services program.		DHHS Mgt.	Federal Expend. Fund	1	14960	IN	(\$52,644)	(\$56,140)	(\$1,904)	(\$1,904)	0.000	0.000
75	Z036	Division of Licensing and Regulatory Services	C-A-1311	Reallocates funding for 105 positions to 35% General Fund and 65% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 35% General Fund and 65% Other Special Revenue Funds within the Division of Licensing and Regulatory Services program.		DHHS Mgt.	Other Special Rev. Funds	1	14970	IN	(\$23,257)	(\$25,231)	\$0	\$0	0.000	0.000
76	Z035	Division of Purchased Services	C-A-1312	Reallocates funding for 30 positions to 66% General Fund and 34% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 66% General Fund and 34% Other Special Revenue Funds within the Division of Purchased Services program.		DHHS Mgt.	Other Special Rev. Funds	1	14820	IN	\$407,488	\$422,262	\$11,419	\$11,419	0.000	0.000
77	Z035	Division of Purchased Services	C-A-1312	Reallocates funding for 30 positions to 66% General Fund and 34% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 66% General Fund and 34% Other Special Revenue Funds within the Division of Purchased Services program.		DHHS Mgt.	General Fund	1	14810	IN	(\$407,488)	(\$422,262)	(\$80,795)	(\$80,795)	0.000	0.000
78	Z020	Office of Integrated Access and Support - Central Office	C-A-1313	Reallocates funding for 70 positions to 50% General Fund and 50% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 50% General Fund and 50% Other Special Revenue Funds within the Office of Integrated Access and Support - Central Office program.		DHHS Mgt.	General Fund	1	14650	IN	\$745,965	\$770,052	\$2,994,291	\$2,994,291	0.000	0.000
79	Z020	Office of Integrated Access and Support - Central Office	C-A-1313	Reallocates funding for 70 positions to 50% General Fund and 50% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 50% General Fund and 50% Other Special Revenue Funds within the Office of Integrated Access and Support - Central Office program.		DHHS Mgt.	Other Special Rev. Funds	1	14660	IN	(\$745,965)	(\$770,052)	(\$19,032)	(\$19,032)	0.000	0.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
80	453	Bureau of Family Independence - Regional	C-A-1314	Reallocates funding for 460 full-time positions and 4 part-time positions to 50% General Fund and 50% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 50% General Fund and 50% Other Special Revenue Funds within the Bureau of Family Independence - Regional program.		DHHS Mgt.	Other Special Rev. Funds	1	13750	IN	\$338,958	\$354,272	\$7,612	\$7,612	0.000	0.000
81	453	Bureau of Family Independence - Regional	C-A-1314	Reallocates funding for 460 full-time positions and 4 part-time positions to 50% General Fund and 50% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 50% General Fund and 50% Other Special Revenue Funds within the Bureau of Family Independence - Regional program.		DHHS Mgt.	General Fund	1	13740	IN	(\$338,958)	(\$354,272)	(\$463,127)	(\$463,127)	0.000	0.000
82	196	OMB Division of Regional Business Operations	C-A-1315	Reallocates funding for all positions in the program to 55% General Fund and 45% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 55% General Fund and 45% Other Special Revenue Funds within the Office of Management and Budget Division of Regional Operations program.		DHHS Mgt.	General Fund	1	13190	IN	\$507,828	\$530,540	(\$624,006)	(\$639,616)	0.000	0.000
83	196	OMB Division of Regional Business Operations	C-A-1315	Reallocates funding for all positions in the program to 55% General Fund and 45% Other Special Revenue Funds based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 55% General Fund and 45% Other Special Revenue Funds within the Office of Management and Budget Division of Regional Operations program.		DHHS Mgt.	Other Special Rev. Funds	1	13200	IN	(\$507,828)	(\$530,540)	(\$13,323)	(\$13,323)	0.000	0.000
84	142	Office of Management and Budget	C-A-1316	Reallocates position funding based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 60% General Fund and 40% Other Special Revenue Funds within the Office of Management and Budget program.		DHHS Mgt.	General Fund	1	12220	IN	\$341,125	\$356,869	(\$2,822,872)	(\$2,840,178)	0.000	0.000
85	142	Office of Management and Budget	C-A-1316	Reallocates position funding based on the cost allocation plan. Position detail is on file with the Bureau of the Budget.	This initiative reallocates position costs to 60% General Fund and 40% Other Special Revenue Funds within the Office of Management and Budget program.		DHHS Mgt.	Other Special Rev. Funds	1	12230	IN	(\$341,125)	(\$356,869)	(\$7,612)	(\$7,612)	0.000	0.000

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86	196	OMB Division of Regional Business Operations	C-A-1317	Transfers one Community Services Manager position and one Office Assistant II position from the General Fund in the OMB Division of Regional Business Operations program to 50% General Fund and 50% Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program.	This initiative transfers 2 positions that are currently funded 100% General Fund in the OMB Division of Regional Business Operations program to the Office of Integrated Access and Support - Central Office program where they will be funded 50% General Fund and 50% Other Special Revenue Funds.		DHHS Mgt.	General Fund	1	13210	IN	(\$166,148)	(\$170,071)	(\$8,043)	(\$8,043)	-2.000	-2.000
87	Z020	Office of Integrated Access and Support - Central Office	C-A-1317	Transfers one Community Services Manager position and one Office Assistant II position from the General Fund in the OMB Division of Regional Business Operations program to 50% General Fund and 50% Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program.	This initiative transfers 2 positions that are currently funded 100% General Fund in the OMB Division of Regional Business Operations program to the Office of Integrated Access and Support - Central Office program where they will be funded 50% General Fund and 50% Other Special Revenue Funds.		DHHS Mgt.	General Fund	1	14670	IN	\$83,078	\$85,039	\$4,446	\$4,446	2.000	2.000
88	Z020	Office of Integrated Access and Support - Central Office	C-A-1317	Transfers one Community Services Manager position and one Office Assistant II position from the General Fund in the OMB Division of Regional Business Operations program to 50% General Fund and 50% Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program.	This initiative transfers 2 positions that are currently funded 100% General Fund in the OMB Division of Regional Business Operations program to the Office of Integrated Access and Support - Central Office program where they will be funded 50% General Fund and 50% Other Special Revenue Funds.		DHHS Mgt.	Other Special Rev. Funds	1	14680	IN	\$83,070	\$85,032	\$1,904	\$1,904	0.000	0.000
89	100	Child Support	C-A-1319	Transfers one Office Assistant II position from Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program to 34% General Fund and 66% Federal Expenditures Fund in the Child Support program.	This position works entirely on the Child Support program. This initiative moves the position to the appropriate accounts.		DHHS Mgt.	General Fund	1	11480	IN	\$15,706	\$16,786	\$1,239	\$1,239	1.000	1.000

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90	100	Child Support	C-A-1319	Transfers one Office Assistant II position from Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program to 34% General Fund and 66% Federal Expenditures Fund in the Child Support program.	This position works entirely on the Child Support program. This initiative moves the position to the appropriate accounts.		DHHS Mgt.	Federal Expend. Fund	1	11490	IN	\$30,489	\$32,583	\$3,289	\$3,345	0.000	0.000
91	2020	Office of Integrated Access and Support - Central Office	C-A-1319	Transfers one Office Assistant II position from Other Special Revenue Funds in the Office of Integrated Access and Support - Central Office program to 34% General Fund and 66% Federal Expenditures Fund in the Child Support program.	This position works entirely on the Child Support program. This initiative moves the position to the appropriate accounts.		DHHS Mgt.	Other Special Rev. Funds	1	14690	IN	(\$46,195)	(\$49,369)	(\$1,903)	(\$1,903)	-1.000	-1.000
92	137	IV-E Foster Care/Adoption Assistance	C-A-1320	Transfers 26 full-time and 2 part-time positions and related All Other between various accounts within programs administered by the Bureau of Child and Family Services to place them in the proper functional location. Position detail is on file in the Bureau of the Budget.	The transfer of these staff will place them in the proper functional location, and it will increase federal participation of some position costs, due to eligibility of the positions to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	Federal Expend. Fund	1	11800	IN	(\$526,558)	(\$552,231)	(\$18,386)	(\$18,386)	-10.000	-10.000
93	228	Purchased Social Services	C-A-1320	Transfers 26 full-time and 2 part-time positions and related All Other between various accounts within programs administered by the Bureau of Child and Family Services to place them in the proper functional location. Position detail is on file in the Bureau of the Budget.	The transfer of these staff will place them in the proper functional location, and it will increase federal participation of some position costs, due to eligibility of the positions to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	General Fund	1	13430	IN	\$138,434	\$146,961	\$7,287	\$7,287	2.000	2.000
94	307	Bureau of Child and Family Services - Central	C-A-1320	Transfers 26 full-time and 2 part-time positions and related All Other between various accounts within programs administered by the Bureau of Child and Family Services to place them in the proper functional location. Position detail is on file in the Bureau of the Budget.	The transfer of these staff will place them in the proper functional location, and it will increase federal participation of some position costs, due to eligibility of the positions to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	Federal Expend. Fund	1	13500	IN	\$478,437	\$496,411	\$43,323	\$43,955	7.000	7.000

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95	307	Bureau of Child and Family Services - Central	C-A-1320	Transfers 26 full-time and 2 part-time positions and related All Other between various accounts within programs administered by the Bureau of Child and Family Services to place them in the proper functional location. Position detail is on file in the Bureau of the Budget.	The transfer of these staff will place them in the proper functional location, and it will increase federal participation of some position costs, due to eligibility of the positions to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	General Fund	1	13490	IN	(\$655,653)	(\$680,185)	(\$31,917)	(\$31,917)	-9.500	-9.500
96	452	Bureau of Child and Family Services - Regional	C-A-1320	Transfers 26 full-time and 2 part-time positions and related All Other between various accounts within programs administered by the Bureau of Child and Family Services to place them in the proper functional location. Position detail is on file in the Bureau of the Budget.	The transfer of these staff will place them in the proper functional location, and it will increase federal participation of some position costs, due to eligibility of the positions to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	General Fund	1	13660	IN	\$565,340	\$589,044	\$35,562	\$35,562	10.500	10.500
97	129	Bureau of Medical Services	C-A-1321	Transfers 2 Public Service Coordinator I positions and one Public Service Manager II position from the Federal Expenditures Fund in the Bureau of Medical Services program to the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program; reallocates 50% of the cost of one Management Analyst II position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program; and transfers one Public Service Manager I position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Federal Expend. Fund	1	11580	IN	(\$188,763)	(\$195,146)	(\$12,548)	(\$12,717)	-3.000	-3.000

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98	142	Office of Management and Budget	C-A-1321	Transfers 2 Public Service Coordinator I positions and one Public Service Manager II position from the Federal Expenditures Fund in the Bureau of Medical Services program to the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program; reallocates 50% of the cost of one Management Analyst II position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program; and transfers one Public Service Manager I position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Other Special Rev. Funds	1	12250	IN	\$229,924	\$237,399	\$15,522	\$15,722	4.000	4.000

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99	142	Office of Management and Budget	C-A-1321	Transfers 2 Public Service Coordinator I positions and one Public Service Manager II position from the Federal Expenditures Fund in the Bureau of Medical Services program to the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program; reallocates 50% of the cost of one Management Analyst II position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program; and transfers one Public Service Manager I position from the General Fund to Other Special Revenue Funds in the Office of Management and Budget program and reallocates 50% of the cost from the Federal Expenditures Fund in the Bureau of Medical Services program to Other Special Revenue Funds in the Office of Management and Budget program.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	General Fund	1	12240	IN	(\$41,161)	(\$42,253)	(\$2,011)	(\$2,011)	-1.000	-1.000

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100	129	Bureau of Medical Services	C-A-1322	Reallocates the portion of the cost of 2 Office Associate II positions, one Office Associate II Manager position, one Mental Health Worker III position, one Public Service Manager III position, one Social Services Program Specialist I position, 3 Social Services Program Specialist II positions and one Social Services Program Manager position currently budgeted in the Bureau of Medical Services program, Federal Expenditures Fund to Other Special Revenue Funds in the Office of Management and Budget program based on the cost allocation plan. The final allocation for these positions is 60% General Fund and 40% Other Special Revenue Funds. Position detail is on file in the Bureau of the Budget.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Federal Expend. Fund	1	11590	IN	(\$239,382)	(\$247,737)	(\$5,043)	(\$5,043)	0.000	0.000
101	142	Office of Management and Budget	C-A-1322	Reallocates the portion of the cost of 2 Office Associate II positions, one Office Associate II Manager position, one Mental Health Worker III position, one Public Service Manager III position, one Social Services Program Specialist I position, 3 Social Services Program Specialist II positions and one Social Services Program Manager position currently budgeted in the Bureau of Medical Services program, Federal Expenditures Fund to Other Special Revenue Funds in the Office of Management and Budget program based on the cost allocation plan. The final allocation for these positions is 60% General Fund and 40% Other Special Revenue Funds. Position detail is on file in the Bureau of the Budget.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Other Special Rev. Funds	1	12270	IN	\$316,835	\$327,257	\$21,238	\$21,495	0.000	0.000

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102	142	Office of Management and Budget	C-A-1322	Reallocates the portion of the cost of 2 Office Associate II positions, one Office Associate II Manager position, one Mental Health Worker III position, one Public Service Manager III position, one Social Services Program Specialist I position, 3 Social Services Program Specialist II positions and one Social Services Program Manager position currently budgeted in the Bureau of Medical Services program, Federal Expenditures Fund to Other Special Revenue Funds in the Office of Management and Budget program based on the cost allocation plan. The final allocation for these positions is 60% General Fund and 40% Other Special Revenue Funds. Position detail is on file in the Bureau of the Budget.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	General Fund	1	12260	IN	(\$77,453)	(\$79,520)	(\$3,820)	(\$3,820)	0.000	0.000
103	142	Office of Management and Budget	C-A-1323	Transfers one Management Analyst II position from the General Fund and 3 Public Service Coordinator I positions from Other Special Revenue Funds within the Division of Purchased Services program to the General Fund in the Office of Management and Budget program and reallocates 40% of the cost to Other Special Revenue Funds based on the cost allocation plan.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	General Fund	1	12280	IN	\$218,127	\$225,354	\$9,652	\$9,652	4.000	4.000

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104	142	Office of Management and Budget	C-A-1323	Transfers one Management Analyst II position from the General Fund and 3 Public Service Coordinator I positions from Other Special Revenue Funds within the Division of Purchased Services program to the General Fund in the Office of Management and Budget program and reallocates 40% of the cost to Other Special Revenue Funds based on the cost allocation plan.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Other Special Rev. Funds	1	12290	IN	\$145,420	\$150,237	\$3,045	\$3,045	0.000	0.000
105	Z035	Division of Purchased Services	C-A-1323	Transfers one Management Analyst II position from the General Fund and 3 Public Service Coordinator I positions from Other Special Revenue Funds within the Division of Purchased Services program to the General Fund in the Office of Management and Budget program and reallocates 40% of the cost to Other Special Revenue Funds based on the cost allocation plan.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	General Fund	1	14830	IN	(\$75,960)	(\$78,488)	(\$4,022)	(\$4,022)	-1.000	-1.000
106	Z035	Division of Purchased Services	C-A-1323	Transfers one Management Analyst II position from the General Fund and 3 Public Service Coordinator I positions from Other Special Revenue Funds within the Division of Purchased Services program to the General Fund in the Office of Management and Budget program and reallocates 40% of the cost to Other Special Revenue Funds based on the cost allocation plan.	This initiative will allow positions with tasks that entail working on multiple programs with multiple funding sources to be reimbursed through the department's cost allocation process.		DHHS Mgt.	Other Special Rev. Funds	1	14840	IN	(\$287,587)	(\$297,103)	(\$5,709)	(\$5,709)	-3.000	-3.000

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107	129	Bureau of Medical Services	C-A-1324	Reallocates the cost of one Assistant Director Division Medicaid/Medicare Services position, 2 Auditor II positions, 4 Comprehensive Health Planner I positions, 2 Comprehensive Health Planner II positions, one Medicaid Surveillance and Utilization Supervisor position, one Management Analyst II position and 2 Planning and Research Associate I positions from the Office of Management and Budget, General Fund and Bureau of Medical Services, Federal Expenditures Fund accounts to the Office of Management and Budget, General Fund and Office of Management and Budget, Other Special Revenue Funds accounts.	This initiative will place these positions in MaineCare administration accounts in order to align the job functions with the appropriate funding.	Fixed in	DHHS Mgt.	Federal Expend. Fund	1	11600	IN	(\$473,329)	(\$492,700)	(\$10,943)	(\$10,943)	-7.000	-7.000
108	142	Office of Management and Budget	C-A-1324	Reallocates the cost of one Assistant Director Division Medicaid/Medicare Services position, 2 Auditor II positions, 4 Comprehensive Health Planner I positions, 2 Comprehensive Health Planner II positions, one Medicaid Surveillance and Utilization Supervisor position, one Management Analyst II position and 2 Planning and Research Associate I positions from the Office of Management and Budget, General Fund and Bureau of Medical Services, Federal Expenditures Fund accounts to the Office of Management and Budget, General Fund and Office of Management and Budget, Other Special Revenue Funds accounts.	This initiative will place these positions in MaineCare administration accounts in order to align the job functions with the appropriate funding.		DHHS Mgt.	Other Special Rev. Funds	1	12310	IN	\$500,689	\$521,830	\$25,277	\$25,843	8.000	8.000

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109	142	Office of Management and Budget	C-A-1324	Reallocates the cost of one Assistant Director Division Medicaid/Medicare Services position, 2 Auditor II positions, 4 Comprehensive Health Planner I positions, 2 Comprehensive Health Planner II positions, one Medicaid Surveillance and Utilization Supervisor position, one Management Analyst II position and 2 Planning and Research Associate I positions from the Office of Management and Budget, General Fund and Bureau of Medical Services, Federal Expenditures Fund accounts to the Office of Management and Budget, General Fund and Office of Management and Budget, Other Special Revenue Funds accounts.	This initiative will place these positions in MaineCare administration accounts in order to align the job functions with the appropriate funding.		DHHS Mgt.	General Fund	1	12300	IN	(\$27,360)	(\$29,130)	(\$2,011)	(\$2,011)	-1.000	-1.000
110	105	Riverview Psychiatric Center	C-A-1325	Eliminates one Accounting Assistant position, one Inventory and Property Associate I position, one Office Associate II position, one Planning and Research Assistant position, one Public Service Manager III position and one Quality Assurance Director position and establishes 5 Hospital Nurse III positions, one Intensive Case Manager position and 15 Hospital Nurse II positions. The cost of these positions is allocated between the General Fund and Other Special Revenue Funds in accordance with MaineCare match rates, and the additional net General Fund cost is offset by a reduction in All Other.	Several years ago, Riverview Psychiatric Center gave up headcount for All Other funding in order to hire nurses through contracts. Current economic conditions make it less costly to hire the staff as state employees.		DHHS Mgt.	Other Special Rev. Funds	20	3180	IN	\$818,240	\$859,923	\$9,163	\$9,665	15.000	15.000

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111	733	Disproportionate Share - Riverview Psychiatric Center	C-A-1325	Eliminates one Accounting Assistant position, one Inventory and Property Associate I position, one Office Associate II position, one Planning and Research Assistant position, one Public Service Manager III position and one Quality Assurance Director position and establishes 5 Hospital Nurse III positions, one Intensive Case Manager position and 15 Hospital Nurse II positions. The cost of these positions is allocated between the General Fund and Other Special Revenue Funds in accordance with MaineCare match rates, and the additional net General Fund cost is offset by a reduction in All Other.	Several years ago, Riverview Psychiatric Center gave up headcount for All Other funding in order to hire nurses through contracts. Current economic conditions make it less costly to hire the staff as state employees.	Related	DHHS Mgt.	General Fund	10	3910	IN	\$472,369	\$499,244	(\$472,369)	(\$499,244)	0.000	0.000
112	146	Additional Support for People in Retraining and Employment	C-A-1325	Transfers one Office Associate II position from Other Special Revenue Funds in the Bureau of Family Independence - Regional program to the Federal Block Grant Fund in the Additional Support for People in Retraining and Employment program.	This initiative transfer funds from the agency nursing contract to pay for positions.		DHHS Mgt.	Federal Block Grant Fund	1	12640	IN	\$46,463	\$49,626	\$4,992	\$5,077	1.000	1.000
113	453	Bureau of Family Independence - Regional	C-A-1325	Transfers one Office Associate II position from Other Special Revenue Funds in the Bureau of Family Independence - Regional program to the Federal Block Grant Fund in the Additional Support for People in Retraining and Employment program.	This initiative transfer funds from the agency nursing contract to pay for positions.		DHHS Mgt.	Other Special Rev. Funds	1	13760	IN	(\$46,463)	(\$49,626)	(\$1,904)	(\$1,904)	-1.000	-1.000
114	143	Health - Bureau of	C-A-1327	Reorganizes one Public Service Coordinator I position to a Public Service Coordinator II position.	The purpose of the reorganization request is to bring the State Toxicologist position into the Maine Management System and to make the position's compensation equal to that of other program directors within the Maine CDC.		DHHS Mgt.	General Fund	1	12490	IN	\$15,281	\$15,493	(\$15,281)	(\$15,493)	0.000	0.000

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115	121	Mental Health Services - Community	C-A-1330	Transfers one Social Services Manager I position and one Integrated Systems Manager position from the Office of Management and Budget program to the Mental Health Services - Community program within the General Fund.	These positions moved from the Office of Management and Budget to Mental Health Services, and this initiative corrects the funding for them.		DHHS Mgt.	General Fund	2	3290	IN	\$206,004	\$210,662	\$0	\$0	2.000	2.000
116	142	Office of Management and Budget	C-A-1330	Transfers one Social Services Manager I position and one Integrated Systems Manager position from the Office of Management and Budget program to the Mental Health Services - Community program within the General Fund.	Transfers one Social Services Manager I position and one Integrated Systems Manager position from the Office of Management and Budget program to the Mental Health Services - Community program within the General Fund.		DHHS Mgt.	General Fund	1	12320	IN	(\$206,004)	(\$210,662)	\$0	\$0	-2.000	-2.000
117	140	Office of Elder Services Central Office	C-A-1448	Transfers one Office Specialist I position from the Federal Expenditures Fund to the General Fund within the Office of Elder Services Central Office program.	Transfers one Office Specialist I position and related All Other from the Federal Expenditures Fund to General Fund within the Office of Elder Services program. This change in funding will accurately represent work that is being performed in this position.		DHHS Mgt.	General Fund	1	12090	IN	\$60,674	\$62,138	\$3,644	\$3,644	1.000	1.000
118	140	Office of Elder Services Central Office	C-A-1448	Transfers one Office Specialist I position from the Federal Expenditures Fund to the General Fund within the Office of Elder Services Central Office program.	Transfers one Office Specialist I position and related All Other from the Federal Expenditures Fund to General Fund within the Office of Elder Services program. This change in funding will accurately represent work that is being performed in this position.		DHHS Mgt.	Federal Expend. Fund	1	12100	IN	(\$60,674)	(\$62,138)	(\$1,904)	(\$1,904)	-1.000	-1.000
119	140	Office of Elder Services Central Office	C-A-1451	Transfers one Office Associate II position from the General Fund to the Federal Expenditures Fund within the Office of Elder Services Central Office program.	Transfers one Office Associate II position and related All Other from the General Fund to Federal Expenditures Fund within the Office of Elder Services program. This change in funding will accurately represent work that is being performed in this position.		DHHS Mgt.	Federal Expend. Fund	1	12120	IN	\$58,037	\$59,463	\$4,315	\$4,330	1.000	1.000
120	140	Office of Elder Services Central Office	C-A-1451	Transfers one Office Associate II position from the General Fund to the Federal Expenditures Fund within the Office of Elder Services Central Office program.	Transfers one Office Associate II position and related All Other from the General Fund to Federal Expenditures Fund within the Office of Elder Services program. This change in funding will accurately represent work that is being performed in this position.		DHHS Mgt.	General Fund	1	12110	IN	(\$58,037)	(\$59,463)	(\$1,904)	(\$1,904)	-1.000	-1.000
121	143	Health - Bureau of	C-A-1459	Transfers one Environmental Specialist III position and related All Other from the Plumbing - Control Over program to the Health - Bureau of program.	This initiative will correct the funding for this position which was formerly the Subsurface Wastewater Program Director but is now an Environmental Specialist II position within the Health Inspection Program.		DHHS Mgt.	Other Special Rev. Funds	11	12500	IN	\$69,856	\$74,492	\$5,619	\$5,743	1.000	1.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
122	205	Plumbing - Control Over	C-A-1459	Transfers one Environmental Specialist III position and related All Other from the Plumbing - Control Over program to the Health - Bureau of program.	This initiative will correct the funding for this position which was formerly the Subsurface Wastewater Program Director but is now an Environmental Specialist II position within the Health Inspection Program.		DHHS Mgt.	Other Special Rev. Funds	1	13310	IN	(\$69,856)	(\$74,492)	(\$1,904)	(\$1,904)	-1.000	-1.000
123	307	Bureau of Child and Family Services - Central	C-A-1463	Transfers one Customer Representative Associate II - Human Services position from the Bureau of Child and Family Services - Regional program to the Bureau of Child and Family Services - Central program to place the position in the correct functional location and allow proper allocation of position costs.	The transfer will increase federal participation of position cost, due to eligibility of the position to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	General Fund	1	13510	IN	\$53,428	\$56,939	\$3,644	\$3,644	1.000	1.000
124	452	Bureau of Child and Family Services - Regional	C-A-1463	Transfers one Customer Representative Associate II - Human Services position from the Bureau of Child and Family Services - Regional program to the Bureau of Child and Family Services - Central program to place the position in the correct functional location and allow proper allocation of position costs.	The transfer will increase federal participation of position cost, due to eligibility of the position to participate in the Random Moment in Time Study (RMTS) and cost allocation process. Transferring staff to RMTS increases received federal funds from 23% to over 40%.		DHHS Mgt.	General Fund	1	13670	IN	(\$53,428)	(\$56,939)	(\$3,644)	(\$3,644)	-1.000	-1.000
125	121	Mental Health Services - Community	C-A-1465	Transfers one Public Service Manager II position from the Mental Health Services - Community program to Office of Management and Budget program within the General Fund.	This initiative will transfer one Public Service Manager II position from Bureau of Mental Health, General Fund to the Office of Management and Budget, General Fund to place the position in the proper functional location.		DHHS Mgt.	General Fund	2	3300	IN	(\$85,368)	(\$86,706)	(\$2,413)	(\$2,413)	-1.000	-1.000
126	142	Office of Management and Budget	C-A-1465	Transfers one Public Service Manager II position from the General Fund in the Mental Health Services - Community program to 60% General Fund and 40% Other Special Revenue Funds in the Office of Management and Budget program.	This initiative will transfer 1 Public Service Manager II position from Bureau of Mental Health to the Office of Management and Budget.		DHHS Mgt.	General Fund	1	12330	IN	\$51,220	\$52,023	\$2,413	\$2,413	1.000	1.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
127	142	Office of Management and Budget	C-A-1465	Transfers one Public Service Manager II position from the General Fund in the Mental Health Services - Community program to 60% General Fund and 40% Other Special Revenue Funds in the Office of Management and Budget program.	This initiative will transfer 1 Public Service Manager II position from Bureau of Mental Health to the Office of Management and Budget.		DHHS Mgt.	Other Special Rev. Funds	1	12340	IN	\$34,148	\$34,683	\$762	\$762	0.000	0.000
128	121	Mental Health Services - Community	C-A-1466	Transfers one Mental Health Caseworker Supervisor position from the Mental Health Services Community program to the Developmental Services - Community program.	This initiative will transfer one Mental Health Caseworker Supervisor position from the Mental Health Services - Community program, General Fund to the Developmental Services Community program, General Fund to place the position in the proper functional location.		DHHS Mgt.	General Fund	2	3310	IN	(\$83,831)	(\$85,620)	(\$3,644)	(\$3,644)	-1.000	-1.000
129	122	Developmental Services - Community	C-A-1466	Transfers one Mental Health Caseworker Supervisor position from the Mental Health Services Community program to the Developmental Services - Community program.	This initiative will transfer one Mental Health Caseworker Supervisor position from the Mental Health Services - Community program, General Fund to the Developmental Services Community program, General Fund to place the position in the proper functional location.		DHHS Mgt.	General Fund	60	3390	IN	\$83,831	\$85,620	\$3,644	\$3,644	1.000	1.000
130	143	Health - Bureau of	C-A-1467	Reorganizes one Planning and Research Associate II position to a Health Program Manager position.	The work being performed by this position is consistent with that of a Health Program Manager and this reorganization will align the job responsibilities with the proper job classification.		DHHS Mgt.	Federal Expend. Fund	3	12510	IN	\$17,114	\$14,936	\$0	\$0	0.000	0.000
131	143	Health - Bureau of	C-A-1469	Reorganizes one Public Health Educator III position to a Comprehensive Health Planner II position.	The work being performed by this position is consistent with that of a Comprehensive Health Planner II and this reorganization will align the job responsibilities with the proper job classification.		DHHS Mgt.	Federal Expend. Fund	3	12520	IN	\$4,086	\$4,330	\$0	\$0	0.000	0.000
132	143	Health - Bureau of	C-A-1469	Reorganizes one Public Health Educator III position to a Comprehensive Health Planner II position.	The work being performed by this position is consistent with that of a Comprehensive Health Planner II and this reorganization will align the job responsibilities with the proper job classification.		DHHS Mgt.	Other Special Rev. Funds	13	12530	IN	\$4,086	\$4,330	\$0	\$0	0.000	0.000
133	143	Health - Bureau of	C-A-1470	Reallocates 25% of the cost of one Senior Health Program Manager position from the Federal Block Grant Fund to the Federal Expenditures Fund within the Health - Bureau of program.	25% of the cost for this position is currently budgeted to a block grant account, 015-10A-014305, however 100% of the time for this position is spent working on a federal categorical grant within account 013-10A-014303.		DHHS Mgt.	Federal Expend. Fund	3	12540	IN	\$23,082	\$23,559	\$1,555	\$1,568	0.000	0.000
134	143	Health - Bureau of	C-A-1470	Reallocates 25% of the cost of one Senior Health Program Manager position from the Federal Block Grant Fund to the Federal Expenditures Fund within the Health - Bureau of program.	25% of the cost for this position is currently budgeted to a block grant account, 015-10A-014305, however 100% of the time for this position is spent working on a federal categorical grant within account 013-10A-014303.		DHHS Mgt.	Federal Block Grant Fund	5	12550	IN	(\$23,082)	(\$23,559)	(\$395)	(\$395)	0.000	0.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
135	139	State-funded Foster Care/Adoption Assistance	C-A-1471	Transfers 5 Human Services Caseworker positions, one Human Services Caseworker Supervisor position, 3 Social Services Program Specialist II positions and one Secretary Supervisor position from the State-funded Foster Care/Adoption Assistance program to other programs within the Bureau of Child and Family Services based upon changes in federal regulations. Position detail is on file in the Bureau of the Budget.	The Federal Government has clarified that 10% of an IV-B grant award can be used for administrative costs. These positions are clearly administrative and need to be moved to meet federal requirements. Moving these costs out will be accompanied or offset by moving other eligible costs in from the General Fund Child Welfare expenditures. Non-administrative expenditures will be transferred from the General Fund to the grant award, resulting in no additional General Fund cost. Change is necessary due to change in IV-B regulations.		DHHS Mgt.	Federal Expend. Fund	1	12020	IN	(\$745,758)	(\$770,841)	(\$18,078)	(\$18,078)	-10.000	-10.000
136	307	Bureau of Child and Family Services - Central	C-A-1471	Transfers 5 Human Services Caseworker positions, one Human Services Caseworker Supervisor position, 3 Social Services Program Specialist II positions and one Secretary Supervisor position from the State-funded Foster Care/Adoption Assistance program to other programs within the Bureau of Child and Family Services based upon changes in federal regulations. Position detail is on file in the Bureau of the Budget.	The Federal Government has clarified that 10% of an IV-B grant award can be used for administrative costs. These positions are clearly administrative and need to be moved to meet federal requirements. Moving these costs out will be accompanied or offset by moving other eligible costs in from the General Fund Child Welfare expenditures. Non-administrative expenditures will be transferred from the General Fund to the grant award, resulting in no additional General Fund cost. Change is necessary due to change in IV-B regulations.		DHHS Mgt.	General Fund	1	13520	IN	\$248,672	\$255,524	(\$248,672)	(\$255,524)	3.000	3.000
137	307	Bureau of Child and Family Services - Central	C-A-1471	Transfers 5 Human Services Caseworker positions, one Human Services Caseworker Supervisor position, 3 Social Services Program Specialist II positions and one Secretary Supervisor position from the State-funded Foster Care/Adoption Assistance program to other programs within the Bureau of Child and Family Services based upon changes in federal regulations. Position detail is on file in the Bureau of the Budget.	The Federal Government has clarified that 10% of an IV-B grant award can be used for administrative costs. These positions are clearly administrative and need to be moved to meet federal requirements. Moving these costs out will be accompanied or offset by moving other eligible costs in from the General Fund Child Welfare expenditures. Non-administrative expenditures will be transferred from the General Fund to the grant award, resulting in no additional General Fund cost. Change is necessary due to change in IV-B regulations.		DHHS Mgt.	Federal Expend. Fund	1	13530	IN	\$90,963	\$93,270	\$6,986	\$7,067	1.000	1.000

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138	452	Bureau of Child and Family Services - Regional	C-A-1471	Transfers 5 Human Services Caseworker positions, one Human Services Caseworker Supervisor position, 3 Social Services Program Specialist II positions and one Secretary Supervisor position from the State-funded Foster Care/Adoption Assistance program to other programs within the Bureau of Child and Family Services based upon changes in federal regulations. Position detail is on file in the Bureau of the Budget.	The Federal Government has clarified that 10% of an IV-B grant award can be used for administrative costs. These positions are clearly administrative and need to be moved to meet federal requirements. Moving these costs out will be accompanied or offset by moving other eligible costs in from the General Fund Child Welfare expenditures. Non-administrative expenditures will be transferred from the General Fund to the grant award, resulting in no additional General Fund cost. Change is necessary due to change in IV-B regulations.		DHHS Mgt.	General Fund	1	13680	IN	\$406,123	\$422,047	(\$406,123)	(\$422,047)	6.000	6.000
139	129	Bureau of Medical Services	C-A-1475	Reallocates the cost of 10 Comprehensive Health Planner II positions, one Health Services Consultant position, one Medical Care Coordinator position, one Management Analyst I position, 2 Office Specialist I positions, one Public Service Manager I position and 2 Public Service Manager II positions within the Bureau of Medical Services program from 25% General Fund and 75% Federal Expenditures Fund to 50% General Fund and 50% Federal Expenditures Fund to align position funding with projected federal reimbursement.	75% of the cost of these positions is currently funded by the Federal Expenditures Fund but the correct funding level is 50%.	Fixed in	DHHS Mgt.	General Fund	1	11610	IN	\$359,722	\$373,725	\$16,395	\$16,395	0.000	0.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
140	129	Bureau of Medical Services	C-A-1475	Reallocates the cost of 10 Comprehensive Health Planner II positions, one Health Services Consultant position, one Medical Care Coordinator position, one Management Analyst I position, 2 Office Specialist I positions, one Public Service Manager I position and 2 Public Service Manager II positions within the Bureau of Medical Services program from 25% General Fund and 75% Federal Expenditures Fund to 50% General Fund and 50% Federal Expenditures Fund to align position funding with projected federal reimbursement.	75% of the cost of these positions is currently funded by the Federal Expenditures Fund but the correct funding level is 50%.	Fixed in	DHHS Mgt.	Federal Expend. Fund	1	11620	IN	(\$358,860)	(\$372,863)	(\$8,565)	(\$8,565)	0.000	0.000
141	Z035	Division of Purchased Services	C-A-1476	Reduces funding to align allocation with available resources.	This initiative eliminates the remaining allocation in this account as there is no longer any funding available.		DHHS Mgt.	Federal Block Grant Fund	1	14850	IN	\$0	\$0	(\$1,015)	(\$1,015)	0.000	0.000
142	142	Office of Management and Budget	C-A-1482	Reduces funding to bring allocations into line with projected available resources.	Reduces funding to bring allocations into line with projected available resources based on existing grant awards within the Office of Management and Budget, Federal Expenditures Fund.		DHHS Mgt.	Federal Expend. Fund	2	12350	IN	\$0	\$0	(\$2,252,363)	(\$2,252,363)	0.000	0.000
143	307	Bureau of Child and Family Services - Central	C-A-1486	Transfers one Public Service Manager III position from the Bureau of Child and Family Services - Regional program to the Bureau of Child and Family Services - Central program.	This initiative transfers one Public Service Manager III position to the proper location. There is no additional cost to the General Fund.		DHHS Mgt.	General Fund	1	13560	IN	\$126,231	\$128,991	\$3,644	\$3,644	1.000	1.000
144	452	Bureau of Child and Family Services - Regional	C-A-1486	Transfers one Public Service Manager III position from the Bureau of Child and Family Services - Regional program to the Bureau of Child and Family Services - Central program.	This initiative transfers one Public Service Manager III position to the proper location. There is no additional cost to the General Fund.		DHHS Mgt.	General Fund	1	13690	IN	(\$126,231)	(\$128,991)	(\$3,644)	(\$3,644)	-1.000	-1.000
145	Z123	Forensic Services	C-A-1491	Transfers one Psychiatric Social Worker II position, one Secretary position, one Public Service Coordinator II position and one Public Service Manager III position from the Office of Management and Budget program to the Forensic Services program.	This change will move positions that are not cost allocated out of a cost allocated account.		DHHS Mgt.	General Fund	1	4280	IN	\$402,729	\$411,374	\$16,086	\$16,086	4.000	4.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
146	142	Office of Management and Budget	C-A-1491	Transfers one Psychiatric Social Worker II position, one Secretary position, one Public Service Coordinator II position and one Public Service Manager III position from the Office of Management and Budget program to the Forensic Services program.	This change will move positions that are not cost allocated out of a cost allocated account.		DHHS Mgt.	General Fund	1	12360	IN	(\$402,729)	(\$411,374)	(\$16,086)	(\$16,086)	-4.000	-4.000
147	679	Office of Substance Abuse	C-A-7003	Continues one limited-period Education Specialist I position originally established by financial order to continue work with Healthy Maine Partnerships. The position will end on June 15, 2013.	This position will assist with the direction of objectives outlined for the Healthy Maine Partnership work, oversee contacts, and provide training and technical assistance. This position works with the Native American Tribes in Maine on substance abuse assessment, prevention and intervention initiatives which is an important link for the Office of Substance Abuse and a requirement of many new grant opportunities. This position expands the office's work with other offices within state government to align and integrate services and this position is identified as the coordinator of the Building State Capacity Grant from the US DOE through the Maine Department of Education and is written into another US DOE grant proposal that OSA and DOE co-wrote. In these grants, this position is doing in-kind project coordination. This position will continue to work with the health care field on the importance of integration of early substance abuse prevention and intervention from health care providers, important elements of health care reform.		DHHS Mgt.	Federal Block Grant Fund	1	3570	IN	\$85,893	\$91,012	\$4,000	\$4,000	0.000	0.000
148	143	Health - Bureau of	C-A-7004	Reallocates 25% of the cost of one Comprehensive Health Planner II position from the Risk Reduction program, Federal Block Grant Fund to the Health - Bureau of program, Federal Block Grant Fund.	The funding for this position should be split between two different federal block grant objectives, but is currently funded in only one. This initiative will properly allocate the position's costs between the two block grants.		DHHS Mgt.	Federal Block Grant Fund	5	12560	IN	\$20,445	\$21,039	\$547	\$563	0.000	0.000
149	489	Risk Reduction	C-A-7004	Reallocates 25% of the cost of one Comprehensive Health Planner II position from the Risk Reduction program, Federal Block Grant Fund to the Health - Bureau of program, Federal Block Grant Fund.	The funding for this position should be split between two different federal block grant objectives, but is currently funded in only one. This initiative will properly allocate the position's costs between the two block grants.		DHHS Mgt.	Federal Block Grant Fund	1	13900	IN	(\$20,445)	(\$21,039)	(\$547)	(\$563)	0.000	0.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
150	143	Health - Bureau of	C-A-7005	Transfers one Public Service Coordinator II position and 50% of its cost from the Federal Expenditures Fund in the Health Bureau of program to the General Fund in the Maternal and Child Health Block Grant Match program and offsets the additional Personal Services cost with a reduction in the All Other line category.	This position is currently funded through 3 different funding sources. One of the accounts being charged is not appropriate based on the work being performed. This initiative places that portion of the position's cost in the correct account, and offsets the additional Personal Services cost with a reduction in All Other.		DHHS Mgt.	Federal Expend. Fund	3	12570	IN	(\$46,473)	(\$49,289)	(\$2,002)	(\$2,002)	-1.000	-1.000
151	Z008	Maternal and Child Health Block Grant Match	C-A-7005	Transfers one Public Service Coordinator II position and 50% of its cost from the Federal Expenditures Fund in the Health Bureau of program to the General Fund in the Maternal and Child Health Block Grant Match program and offsets the additional Personal Services cost with a reduction in the All Other line category.	This position is currently funded through 3 different funding sources. One of the accounts being charged is not appropriate based on the work being performed. This initiative places that portion of the position's cost in the correct account, and offsets the additional Personal Services cost with a reduction in All Other.		DHHS Mgt.	General Fund	1	14500	IN	\$46,473	\$49,289	(\$46,473)	(\$49,289)	1.000	1.000
152	191	Maternal and Child Health	C-A-7006	Transfers one Health Program Manager position from the Federal Block Grant Fund to the Federal Expenditures Fund within the same program.	This initiative places a Health Program Manager position in the appropriate funding source as it is the project manager for the federally-funded and federally-required Project LAUNCH Young Child Wellness Expert program.		DHHS Mgt.	Federal Expend. Fund	1	13140	IN	\$90,178	\$92,277	\$2,411	\$2,467	1.000	1.000
153	191	Maternal and Child Health	C-A-7006	Transfers one Health Program Manager position from the Federal Block Grant Fund to the Federal Expenditures Fund within the same program.	This initiative places a Health Program Manager position in the appropriate funding source as it is the project manager for the federally-funded and federally-required Project LAUNCH Young Child Wellness Expert program.		DHHS Mgt.	Federal Block Grant Fund	1	13150	IN	(\$90,178)	(\$92,277)	(\$2,411)	(\$2,467)	-1.000	-1.000
154	143	Health - Bureau of	C-A-7007	Reorganizes one Social Services Program Specialist I position and one Comprehensive Health Planner I position to 2 Comprehensive Health Planner II positions.	The Women and Infants with Children Program (WIC) has undergone an extensive strategic planning process, which has resulted in organization changes. These positions are working in a supervisory capacity as WIC service unit managers.		DHHS Mgt.	Federal Expend. Fund	3	12580	IN	\$18,814	\$19,375	\$503	\$518	0.000	0.000
156	129	Bureau of Medical Services		RECLASSIFICATIONS			DHHS Mgt.	Federal Expend. Fund	1	11670	IN	\$2,559	\$2,532	\$70	\$69	0.000	0.000
157	140	Office of Elder Services Central Office		RECLASSIFICATIONS			DHHS Mgt.	General Fund	1	12130	IN	\$4,261	\$4,220	(\$4,261)	(\$4,220)	0.000	0.000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	Pers Serv.\$ 2012	Pers Serv.\$ 2013	All Other \$ 2012	All Other \$ 2013	2012 Pos. Count	2013 Pos. Count
165	143	Health - Bureau of		RECLASSIFICATIONS			DHHS Mgt.	Federal Expend. Fund	3	12590	IN	\$5,010	\$7,507	\$135	\$203	0.000	0.000
168	196	OMB Division of Regional Business Operations		RECLASSIFICATIONS			DHHS Mgt.	General Fund	1	13220	IN	\$2,176	\$2,208	(\$2,176)	(\$2,208)	0.000	0.000
169	196	OMB Division of Regional Business Operations		RECLASSIFICATIONS			DHHS Mgt.	Other Special Rev. Funds	1	13230	IN	\$1,781	\$1,806	\$0	\$0	0.000	0.000
170	307	Bureau of Child and Family Services - Central		RECLASSIFICATIONS			DHHS Mgt.	Federal Expend. Fund	1	13570	IN	\$3,045	\$3,938	\$107	\$138	0.000	0.000
171	452	Bureau of Child and Family Services - Regional		RECLASSIFICATIONS			DHHS Mgt.	General Fund	1	13700	IN	\$1,922	\$2,177	(\$1,922)	(\$2,177)	0.000	0.000
177	Z035	Division of Purchased Services		RECLASSIFICATIONS			DHHS Mgt.	General Fund	1	14860	IN	\$1,812	\$1,837	(\$1,812)	(\$1,837)	0.000	0.000
178	Z035	Division of Purchased Services		RECLASSIFICATIONS			DHHS Mgt.	Other Special Rev. Funds	1	14870	IN	\$935	\$949	(\$935)	(\$949)	0.000	0.000
189	Z037	Division of Data, Research and Vital Statistics		RECLASSIFICATIONS			DHHS Mgt.	General Fund	1	15040	IN	\$7,535	\$7,638	(\$7,535)	(\$7,638)	0.000	0.000
190	Z037	Division of Data, Research and Vital Statistics		RECLASSIFICATIONS			DHHS Mgt.	Other Special Rev. Funds	1	15050	IN	\$4,247	\$5,015	\$115	\$135	0.000	0.000

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Appendix C

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
5	105	Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	General Fund	50	3120	IN	7.000	7.000	\$640,407	\$656,774
6	105	Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	20	3130	IN	304.000	304.000	\$19,691,174	\$20,198,377
7	105	Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	21	3140	IN	0.000	0.000	\$500	\$500
8	105	Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	22	3150	IN	0.000	0.000	\$3,253,548	\$3,253,548
9	105	Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	51	3160	IN	0.000	0.000	\$1,048	\$1,048
10	120	Dorothea Dix Psychiatric Center		BASELINE BUDGET		Adult MH	General Fund	55	3200	IN	0.000	0.000	\$2,318,501	\$2,318,501
11	120	Dorothea Dix Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	25	3210	IN	286.000	286.000	\$15,220,399	\$15,702,205
12	120	Dorothea Dix Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	26	3220	IN	0.000	0.000	\$3,466,776	\$3,466,776
13	120	Dorothea Dix Psychiatric Center		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	58	3230	IN	0.000	0.000	\$26,202	\$26,202
14	121	Mental Health Services - Community		BASELINE BUDGET		Adult MH	General Fund	2	3260	IN	90.000	90.000	\$31,016,332	\$31,262,253
15	121	Mental Health Services - Community		BASELINE BUDGET		Adult MH	Federal Expenditures Fund	40	3270	IN	0.000	0.000	\$10,977,731	\$10,977,731
16	121	Mental Health Services - Community		BASELINE BUDGET		Adult MH	Federal Block Grant Fund	92	3280	IN	0.000	0.000	\$960,388	\$960,388
17	732	Mental Health Services - Community Medicaid		BASELINE BUDGET		Adult MH	General Fund	14	3790	IN	0.000	0.000	\$35,242,859	\$35,242,859
18	732	Mental Health Services - Community Medicaid		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	44	3800	IN	0.000	0.000	\$2,490,661	\$2,490,661
19	732	Mental Health Services - Community Medicaid		BASELINE BUDGET		Adult MH	Other Special Revenue Funds	46	3810	IN	0.000	0.000	\$2,771,896	\$2,771,896
20	733	Disproportionate Share - Riverview Psychiatric Center		BASELINE BUDGET		Adult MH	General Fund	10	3890	IN	0.000	0.000	\$10,569,071	\$10,842,466
21	734	Disproportionate Share - Dorothea Dix Psychiatric Center		BASELINE BUDGET		Adult MH	General Fund	15	3930	IN	0.000	0.000	\$7,912,859	\$8,172,579
29	136	Mental Health Services - Children		BASELINE BUDGET		Children's Services	General Fund	7	3420	IN	61.000	61.000	\$17,555,811	\$17,706,161
30	136	Mental Health Services - Children		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	47	3430	IN	0.000	0.000	\$2,447,182	\$2,447,182
31	136	Mental Health Services - Children		BASELINE BUDGET		Children's Services	Federal Block Grant Fund	97	3440	IN	0.000	0.000	\$960,388	\$960,388
32	731	Mental Health Services - Child Medicaid		BASELINE BUDGET		Children's Services	General Fund	17	3720	IN	0.000	0.000	\$21,368,634	\$21,368,634
33	103	Ombudsman Program		BASELINE BUDGET		Children's Services	General Fund	1	10540	IN	0.000	0.000	\$117,697	\$117,697
34	103	Ombudsman Program		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	10550	IN	0.000	0.000	\$57,150	\$57,150

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35	137	IV-E Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	General Fund	1	11770	IN	0.000	0.000	\$13,222,540	\$13,222,540
36	137	IV-E Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	11780	IN	10.000	10.000	\$37,883,140	\$37,908,813
37	137	IV-E Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Other Special Revenue Funds	1	11790	IN	0.000	0.000	\$6,101,863	\$6,101,863
38	139	State-funded Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	General Fund	1	11960	IN	24.000	24.000	\$37,621,520	\$37,686,059
39	139	State-funded Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	11970	IN	10.000	10.000	\$2,855,222	\$2,880,321
40	139	State-funded Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	2	11980	IN	0.000	0.000	\$524	\$524
41	139	State-funded Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Other Special Revenue Funds	1	11990	IN	0.000	0.000	\$1,635,607	\$1,635,607
42	139	State-funded Foster Care/Adoption Assistance		BASELINE BUDGET		Children's Services	Other Special Revenue Funds	2	12000	IN	0.000	0.000	\$524	\$524
43	204	Special Children's Services		BASELINE BUDGET		Children's Services	Federal Block Grant Fund	1	13280	IN	13.000	13.000	\$1,068,556	\$1,104,734
44	307	Bureau of Child and Family Services - Central		BASELINE BUDGET		Children's Services	General Fund	1	13460	IN	25.500	25.500	\$2,445,479	\$2,507,684
45	307	Bureau of Child and Family Services - Central		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	13470	IN	19.500	19.500	\$4,921,095	\$4,965,726
46	307	Bureau of Child and Family Services - Central		BASELINE BUDGET		Children's Services	Other Special Revenue Funds	1	13480	IN	1.000	1.000	\$3,740,385	\$3,746,145
47	452	Bureau of Child and Family Services - Regional		BASELINE BUDGET		Children's Services	General Fund	1	13640	IN	462.500	462.500	\$35,334,032	\$36,661,766
48	452	Bureau of Child and Family Services - Regional		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	13650	IN	0.000	0.000	\$21,941	\$21,941
49	454	Child Care Food Program		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	1	13780	IN	4.000	4.000	\$15,674,206	\$15,680,835
50	545	Head Start		BASELINE BUDGET		Children's Services	General Fund	4	13980	IN	0.000	0.000	\$2,448,875	\$2,448,875
51	545	Head Start		BASELINE BUDGET		Children's Services	Federal Expenditures Fund	4	13990	IN	0.000	0.000	\$109,152	\$109,152
52	563	Child Care Services		BASELINE BUDGET		Children's Services	General Fund	1	14010	IN	0.000	0.000	\$300,000	\$300,000
53	563	Child Care Services		BASELINE BUDGET		Children's Services	Federal Block Grant Fund	1	14020	IN	5.000	5.000	\$16,228,697	\$16,240,612
54	923	Homeless Youth Program		BASELINE BUDGET		Children's Services	General Fund	1	14100	IN	0.000	0.000	\$401,760	\$401,760
55	Z074	Maine Children's Growth Council		BASELINE BUDGET		Children's Services	Other Special Revenue Funds	1	15240	IN	0.000	0.000	\$10,500	\$10,500
58	122	Developmental Services - Community		BASELINE BUDGET		Developmental Services	General Fund	60	3350	IN	235.500	235.500	\$26,490,920	\$27,058,129
59	122	Developmental Services - Community		BASELINE BUDGET		Developmental Services	Federal Expenditures Fund	61	3360	IN	0.000	0.000	\$437,122	\$437,122

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60	122	Developmental Services - Community		BASELINE BUDGET		Developmental Services	Other Special Revenue Funds	62	3370	IN	0.000	0.000	\$400,747	\$400,747
61	705	Medicaid Services - Developmental Services		BASELINE BUDGET		Developmental Services	General Fund	12	3630	IN	0.000	0.000	\$15,224,135	\$15,224,135
62	705	Medicaid Services - Developmental Services		BASELINE BUDGET		Developmental Services	Other Special Revenue Funds	42	3640	IN	0.000	0.000	\$628,994	\$628,994
63	705	Medicaid Services - Developmental Services		BASELINE BUDGET		Developmental Services	Other Special Revenue Funds	52	3650	IN	0.000	0.000	\$15,697,693	\$15,697,693
64	987	Developmental Services Waiver - MaineCare		BASELINE BUDGET		Developmental Services	General Fund	16	4130	IN	0.000	0.000	\$78,644,569	\$78,644,569
65	Z006	Developmental Services Waiver - Supports		BASELINE BUDGET		Developmental Services	General Fund	1	4160	IN	0.000	0.000	\$4,768,976	\$4,768,976
66	Z041	Brain Injury		BASELINE BUDGET		Developmental Services	Federal Expenditures Fund	1	4210	IN	0.000	0.000	\$150,000	\$150,000
67	Z041	Brain Injury		BASELINE BUDGET		Developmental Services	General Fund	1	4200	IN	1.000	1.000	\$117,430	\$119,996
68	Z042	Traumatic Brain Injury Seed		BASELINE BUDGET		Developmental Services	General Fund	1	4230	IN	0.000	0.000	\$111,160	\$111,160
69	Z043	Consumer-directed Services		BASELINE BUDGET		Developmental Services	General Fund	1	4260	IN	1.000	1.000	\$2,227,819	\$2,231,637
155	632	Office of Advocacy - BDS		BASELINE BUDGET		DHHS Management	General Fund	42	3460	IN	7.500	7.500	\$615,076	\$634,357
158	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	General Fund	1	12150	IN	61.000	61.000	\$15,633,738	\$15,793,194
159	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Federal Expenditures Fund	2	12160	IN	0.000	0.000	\$2,473,207	\$2,452,363
160	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Federal Expenditures Fund	5	12170	IN	0.000	0.000	\$172,841	\$172,841
161	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	12180	IN	32.000	32.000	\$9,706,390	\$9,798,918
162	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	5	12190	IN	0.000	0.000	\$326,004	\$326,004
163	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	6	12200	IN	0.000	0.000	\$512	\$512
164	142	Office of Management and Budget		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	7	12210	IN	0.000	0.000	\$512	\$512
166	196	OMB Division of Regional Business Operations		BASELINE BUDGET		DHHS Management	General Fund	1	13170	IN	109.500	109.500	\$13,081,222	\$13,361,263
167	196	OMB Division of Regional Business Operations		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	13180	IN	98.500	98.500	\$9,842,007	\$10,102,549
172	Z034	Multicultural Services		BASELINE BUDGET		DHHS Management	General Fund	1	14750	IN	1.000	1.000	\$103,857	\$110,124
173	Z034	Multicultural Services		BASELINE BUDGET		DHHS Management	Federal Expenditures Fund	1	14760	IN	1.000	1.000	\$1,554,814	\$1,551,312
174	Z035	Division of Purchased Services		BASELINE BUDGET		DHHS Management	General Fund	1	14780	IN	26.000	26.000	\$2,348,561	\$2,425,132

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175	Z035	Division of Purchased Services		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	14790	IN	8.000	8.000	\$771,812	\$797,068
176	Z035	Division of Purchased Services		BASELINE BUDGET		DHHS Management	Federal Block Grant Fund	1	14800	IN	0.000	0.000	\$1,015	\$1,015
179	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	General Fund	1	14890	IN	30.000	30.000	\$3,200,151	\$3,313,358
180	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	Federal Expenditures Fund	1	14900	IN	0.000	0.000	\$211,700	\$215,196
181	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	14910	IN	3.000	3.000	\$691,660	\$697,081
182	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	2	14920	IN	0.000	0.000	\$85,200	\$85,200
183	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	4	14930	IN	74.000	74.000	\$5,263,748	\$5,437,749
184	Z036	Division of Licensing and Regulatory Services		BASELINE BUDGET		DHHS Management	Federal Block Grant Fund	1	14940	IN	0.000	0.000	\$12,724	\$12,724
185	Z037	Division of Data, Research and Vital Statistics		BASELINE BUDGET		DHHS Management	General Fund	1	15000	IN	6.000	6.000	\$1,359,493	\$1,370,473
186	Z037	Division of Data, Research and Vital Statistics		BASELINE BUDGET		DHHS Management	Federal Expenditures Fund	1	15010	IN	3.000	3.000	\$1,982,045	\$1,986,894
187	Z037	Division of Data, Research and Vital Statistics		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	15020	IN	9.000	9.000	\$2,788,121	\$2,812,654
188	Z037	Division of Data, Research and Vital Statistics		BASELINE BUDGET		DHHS Management	Federal Block Grant Fund	1	15030	IN	1.000	1.000	\$81,343	\$82,976
191	Z038	Division of Administrative Hearings		BASELINE BUDGET		DHHS Management	General Fund	1	15070	IN	2.000	2.000	\$161,526	\$165,000
192	Z038	Division of Administrative Hearings		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	15080	IN	10.000	10.000	\$1,045,567	\$1,069,560
193	Z118	Medical Use of Marijuana Fund		BASELINE BUDGET		DHHS Management	Other Special Revenue Funds	1	15260	IN	2.000	2.000	\$208,549	\$217,734
201	140	Office of Elder Services Central Office		BASELINE BUDGET		Elder Services	General Fund	1	12050	IN	11.000	11.000	\$3,292,307	\$3,312,726
202	140	Office of Elder Services Central Office		BASELINE BUDGET		Elder Services	Federal Expenditures Fund	1	12060	IN	6.500	6.500	\$9,668,832	\$9,689,592
203	140	Office of Elder Services Central Office		BASELINE BUDGET		Elder Services	Other Special Revenue Funds	1	12070	IN	0.000	0.000	\$204,000	\$204,000
204	140	Office of Elder Services Central Office		BASELINE BUDGET		Elder Services	Federal Block Grant Fund	1	12080	IN	0.000	0.000	\$415,000	\$415,000
205	202	Low-cost Drugs To Maine's Elderly		BASELINE BUDGET		Elder Services	General Fund	1	13250	IN	0.000	0.000	\$4,962,967	\$4,962,967
206	211	Independent Housing with Services		BASELINE BUDGET		Elder Services	General Fund	1	13360	IN	0.000	0.000	\$1,760,608	\$1,760,608
207	420	Long Term Care - Human Services		BASELINE BUDGET		Elder Services	General Fund	1	13590	IN	0.000	0.000	\$13,545,391	\$13,548,120
208	927	Maine Rx Plus Program		BASELINE BUDGET		Elder Services	General Fund	1	14120	IN	0.000	0.000	\$105,815	\$105,815

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209	927	Maine Rx Plus Program		BASELINE BUDGET		Elder Services	Other Special Revenue Funds	1	14130	IN	0.000	0.000	\$500	\$500
210	Z009	MR/Elderly PNMI Room and Board		BASELINE BUDGET		Elder Services	General Fund	1	14520	IN	0.000	0.000	\$6,274,174	\$6,274,174
211	Z040	Office of Elder Services Adult Protective Services		BASELINE BUDGET		Elder Services	General Fund	1	15120	IN	69.000	69.000	\$6,090,008	\$6,262,344
212	Z040	Office of Elder Services Adult Protective Services		BASELINE BUDGET		Elder Services	Other Special Revenue Funds	1	15130	IN	0.000	0.000	\$126,528	\$126,528
236	947	FHM - Attorney General		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	2840	IN	1.500	1.500	\$147,584	\$155,431
237	948	FHM - Substance Abuse		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	4050	IN	0.000	0.000	\$5,605,972	\$5,605,972
238	Z070	FHM - Dirigo Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	7340	IN	0.000	0.000	\$4,291,311	\$4,291,311
239	949	FHM - School Nurse Consultant		BASELINE BUDGET		FHM	Fund for a Healthy Maine	10	8210	IN	1.000	1.000	\$103,028	\$105,402
240	Z068	FHM - School Breakfast Program		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	8380	IN	0.000	0.000	\$152,068	\$152,068
241	950	FHM - Health Education Centers		BASELINE BUDGET		FHM	Fund for a Healthy Maine	2	10800	IN	0.000	0.000	\$100,353	\$100,353
242	951	FHM - Dental Education		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	10830	IN	0.000	0.000	\$237,740	\$237,740
243	952	FHM - Quality Child Care		BASELINE BUDGET		FHM	Fund for a Healthy Maine	3	10860	IN	0.000	0.000	\$143,629	\$143,629
244	953	FHM - Bureau of Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14160	IN	0.000	0.000	\$878,652	\$878,652
245	953	FHM - Bureau of Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	2	14170	IN	7.000	7.000	\$6,402,080	\$6,421,493
246	953	FHM - Bureau of Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	6	14180	IN	0.000	0.000	\$4,653,383	\$4,653,383
247	953	FHM - Bureau of Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	7	14190	IN	0.000	0.000	\$7,777,979	\$7,788,922
248	953	FHM - Bureau of Health		BASELINE BUDGET		FHM	Fund for a Healthy Maine	8	14200	IN	1.000	1.000	\$1,366,802	\$1,369,315
249	955	FHM - Bureau of Medical Services		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14240	IN	0.000	0.000	\$1,029	\$1,029
250	956	FHM - Family Planning		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14270	IN	0.000	0.000	\$401,430	\$401,430
251	957	FHM - Service Center		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14300	IN	5.000	5.000	\$352,551	\$369,088
252	958	FHM - Donated Dental		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14330	IN	0.000	0.000	\$36,463	\$36,463
253	959	FHM - Head Start		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14360	IN	0.000	0.000	\$1,354,580	\$1,354,580
254	960	FHM - Medical Care		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14380	IN	0.000	0.000	\$7,520,177	\$7,520,177

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255	961	FHM - Purchased Social Services		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14420	IN	0.000	0.000	\$3,942,236	\$3,942,236
256	962	FHM - Bone Marrow Screening		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14440	IN	0.000	0.000	\$80,218	\$80,218
257	Z015	FHM - Drugs for the Elderly and Disabled		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	14550	IN	0.000	0.000	\$11,934,230	\$11,934,230
258	Z048	FHM - Immunization		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	15150	IN	0.000	0.000	\$1,078,884	\$1,078,884
259	963	FHM - Judicial Department		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	16560	IN	1.000	1.000	\$115,534	\$118,387
260	964	FHM - Fire Marshal		BASELINE BUDGET		FHM	Fund for a Healthy Maine	1	20430	IN	3.000	3.000	\$250,419	\$256,865
262	798	Maine Children's Trust Incorporated		BASELINE BUDGET		HHS Other	Other Special Revenue Funds	1	4340	IN	0.000	0.000	\$48,300	\$48,300
263	523	Disability Rights Center		BASELINE BUDGET		HHS Other	General Fund	1	7380	IN	0.000	0.000	\$130,766	\$130,766
264	848	Maine Health Data Organization		BASELINE BUDGET		HHS Other	Other Special Revenue Funds	1	11060	IN	6.000	6.000	\$2,153,109	\$2,168,419
265	663	Maine Hospice Council		BASELINE BUDGET		HHS Other	General Fund	1	11220	IN	0.000	0.000	\$65,884	\$65,884
266	104	Water System Operators - Board of Licensure		BASELINE BUDGET		HHS Other	Other Special Revenue Funds	1	17660	IN	0.000	0.000	\$86,539	\$86,539
271	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	General Fund	1	11510	IN	45.000	45.000	\$30,662,827	\$30,892,171
272	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	Federal Expenditures Fund	1	11520	IN	131.500	131.500	\$79,886,973	\$80,225,808
273	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	Other Special Revenue Funds	1	11530	IN	0.000	0.000	\$1,168,417	\$1,168,417
274	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	Other Special Revenue Funds	4	11540	IN	0.000	0.000	\$300,000	\$300,000
275	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	Other Special Revenue Funds	5	11550	IN	0.000	0.000	\$500	\$500
276	129	Bureau of Medical Services		BASELINE BUDGET		MaineCare Admin	Federal Block Grant Fund	1	11560	IN	0.000	0.000	\$795,334	\$795,334
277	Z055	Prescription Drug Academic Detailing		BASELINE BUDGET		MaineCare Admin	Other Special Revenue Funds	1	15190	IN	0.000	0.000	\$500	\$500
278	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	General Fund	1	12660	IN	0.000	0.000	\$279,781,173	\$279,781,173
279	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Federal Expenditures Fund	1	12670	IN	0.000	0.000	\$1,189,093,780	\$1,189,093,780
280	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	1	12680	IN	0.000	0.000	\$13,549,637	\$13,549,637
281	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	3	12690	IN	0.000	0.000	\$4,700,000	\$4,700,000
282	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	4	12700	IN	0.000	0.000	\$81,386,215	\$81,386,215

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Baseline Budget Items

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
283	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	5	12710	IN	0.000	0.000	\$39,646,729	\$39,646,729
284	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	8	12720	IN	0.000	0.000	\$676,210	\$676,210
285	147	Medical Care - Payments to Providers		BASELINE BUDGET		MaineCare Baseline	Federal Block Grant Fund	1	12730	IN	0.000	0.000	\$25,397,323	\$25,397,323
286	148	Nursing Facilities		BASELINE BUDGET		MaineCare Baseline	General Fund	1	13040	IN	0.000	0.000	\$69,509,265	\$69,509,265
287	148	Nursing Facilities		BASELINE BUDGET		MaineCare Baseline	Federal Expenditures Fund	1	13050	IN	0.000	0.000	\$276,068,439	\$276,068,439
288	148	Nursing Facilities		BASELINE BUDGET		MaineCare Baseline	Other Special Revenue Funds	2	13060	IN	0.000	0.000	\$30,162,997	\$30,162,997
355	978	Residential Treatment Facilities Assessment		BASELINE BUDGET		MaineCare Taxes	Other Special Revenue Funds	1	4100	IN	0.000	0.000	\$1,553,655	\$1,553,655
365	100	Child Support		BASELINE BUDGET		Public Assistance	General Fund	1	11450	IN	31.500	31.500	\$3,608,150	\$3,721,061
366	100	Child Support		BASELINE BUDGET		Public Assistance	Federal Expenditures Fund	1	11460	IN	193.000	193.000	\$14,922,184	\$15,319,150
367	100	Child Support		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	1	11470	IN	0.000	0.000	\$7,911,210	\$7,996,215
368	130	General Assistance - Reimbursement to Cities and Towns		BASELINE BUDGET		Public Assistance	General Fund	1	11690	IN	0.000	0.000	\$5,974,622	\$5,974,622
369	130	General Assistance - Reimbursement to Cities and Towns		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	1	11700	IN	4.000	4.000	\$904,450	\$915,970
370	131	State Supplement to Federal Supplemental Security Income		BASELINE BUDGET		Public Assistance	General Fund	1	11730	IN	0.000	0.000	\$6,945,632	\$6,945,632
371	138	Temporary Assistance for Needy Families		BASELINE BUDGET		Public Assistance	General Fund	1	11860	IN	0.000	0.000	\$25,144,078	\$25,144,078
372	138	Temporary Assistance for Needy Families		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	1	11870	IN	0.000	0.000	\$121,837,654	\$121,837,654
373	138	Temporary Assistance for Needy Families		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	2	11880	IN	0.000	0.000	\$2,620,157	\$2,620,157
374	138	Temporary Assistance for Needy Families		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	3	11890	IN	0.000	0.000	\$500	\$500
375	138	Temporary Assistance for Needy Families		BASELINE BUDGET		Public Assistance	Federal Block Grant Fund	1	11900	IN	0.000	0.000	\$52,303,361	\$52,303,361
376	146	Additional Support for People in Retraining and Employment		BASELINE BUDGET		Public Assistance	General Fund	1	12610	IN	33.000	33.000	\$7,045,622	\$7,130,825
377	146	Additional Support for People in Retraining and Employment		BASELINE BUDGET		Public Assistance	Federal Expenditures Fund	1	12620	IN	0.000	0.000	\$813,973	\$813,973
378	146	Additional Support for People in Retraining and Employment		BASELINE BUDGET		Public Assistance	Federal Block Grant Fund	1	12630	IN	49.500	49.500	\$23,765,160	\$23,886,194
379	208	Disability Determination - Division of		BASELINE BUDGET		Public Assistance	Federal Expenditures Fund	1	13330	IN	65.000	65.000	\$8,511,772	\$8,690,937
380	453	Bureau of Family Independence - Regional		BASELINE BUDGET		Public Assistance	General Fund	1	13720	IN	231.000	231.000	\$16,172,147	\$16,833,869

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
381	453	Bureau of Family Independence - Regional		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	1	13730	IN	232.500	232.500	\$16,293,048	\$16,927,946
382	Z019	Food Supplement Administration		BASELINE BUDGET		Public Assistance	General Fund	1	14580	IN	0.000	0.000	\$2,178,150	\$2,178,150
383	Z019	Food Supplement Administration		BASELINE BUDGET		Public Assistance	Federal Expenditures Fund	1	14590	IN	0.000	0.000	\$3,359,381	\$3,359,381
384	Z020	Office of Integrated Access and Support - Central Office		BASELINE BUDGET		Public Assistance	General Fund	1	14620	IN	21.000	21.000	\$3,284,012	\$3,345,579
385	Z020	Office of Integrated Access and Support - Central Office		BASELINE BUDGET		Public Assistance	Federal Expenditures Fund	4	14630	IN	0.000	0.000	\$530,203	\$528,125
386	Z020	Office of Integrated Access and Support - Central Office		BASELINE BUDGET		Public Assistance	Other Special Revenue Funds	1	14640	IN	49.500	49.500	\$10,946,253	\$11,059,100
391	76	Bone Marrow Screening Fund		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	11430	IN	0.000	0.000	\$10,000	\$10,000
392	143	Health - Bureau of		BASELINE BUDGET		Public Health	General Fund	1	12390	IN	74.500	74.500	\$9,612,068	\$9,792,603
393	143	Health - Bureau of		BASELINE BUDGET		Public Health	Federal Expenditures Fund	3	12400	IN	148.000	148.000	\$68,080,129	\$68,547,262
394	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	3	12410	IN	13.000	13.000	\$5,420,901	\$5,452,174
395	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	4	12420	IN	52.000	52.000	\$5,703,594	\$5,845,410
396	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	8	12430	IN	0.000	0.000	\$846,696	\$847,802
397	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	9	12440	IN	0.000	0.000	\$315,999	\$315,999
398	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	10	12450	IN	0.000	0.000	\$338,000	\$338,000
399	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	11	12460	IN	14.000	14.000	\$1,464,614	\$1,502,429
400	143	Health - Bureau of		BASELINE BUDGET		Public Health	Other Special Revenue Funds	13	12470	IN	3.000	3.000	\$754,300	\$765,225
401	143	Health - Bureau of		BASELINE BUDGET		Public Health	Federal Block Grant Fund	5	12480	IN	3.000	3.000	\$295,639	\$300,108
402	191	Maternal and Child Health		BASELINE BUDGET		Public Health	Federal Expenditures Fund	1	13120	IN	1.000	1.000	\$1,179,571	\$1,182,131
403	191	Maternal and Child Health		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13130	IN	29.000	29.000	\$3,072,368	\$3,157,684
404	205	Plumbing - Control Over		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	13300	IN	6.000	6.000	\$1,254,605	\$1,271,544
405	466	Community Family Planning		BASELINE BUDGET		Public Health	General Fund	1	13800	IN	0.000	0.000	\$225,322	\$225,322
406	486	Dental Disease Prevention		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13820	IN	2.000	2.000	\$198,904	\$205,321
407	487	Hypertension Control		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13840	IN	0.000	0.000	\$26,204	\$26,204

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
408	488	Rape Crisis Control		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13870	IN	0.000	0.000	\$32,720	\$32,720
409	489	Risk Reduction		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13890	IN	2.000	2.000	\$388,567	\$395,054
410	496	Sexually Transmitted Diseases		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13920	IN	0.000	0.000	\$27,763	\$27,763
411	497	Tuberculosis Control Program		BASELINE BUDGET		Public Health	Federal Block Grant Fund	1	13940	IN	2.000	2.000	\$188,800	\$195,672
412	518	Aids Lodging House		BASELINE BUDGET		Public Health	General Fund	1	13960	IN	0.000	0.000	\$37,869	\$37,869
413	697	Maine Water Well Drilling Program		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	14040	IN	1.000	1.000	\$101,336	\$105,207
414	728	Drinking Water Enforcement		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	14080	IN	5.000	5.000	\$1,117,479	\$1,134,781
415	Z008	Maternal and Child Health Block Grant Match		BASELINE BUDGET		Public Health	General Fund	1	14470	IN	1.000	1.000	\$4,669,409	\$4,685,958
416	Z025	Maine School Oral Health Fund		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	14710	IN	0.000	0.000	\$25,000	\$25,000
417	Z027	Maine Asthma and Lung Disease Research Fund (DHHS)		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	14730	IN	0.000	0.000	\$42,500	\$42,500
418	Z054	Comprehensive Cancer Screening, Detection and Prevention Fund		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	15170	IN	0.000	0.000	\$500	\$500
419	Z069	Breast Cancer Services Special Program Fund		BASELINE BUDGET		Public Health	Other Special Revenue Funds	1	15210	IN	0.000	0.000	\$10,800	\$10,800
420	Z121	Universal Childhood Immunization Program		BASELINE BUDGET		Public Health	Private Trust Funds	1	15280	IN	0.000	0.000	\$500	\$500
421	228	Purchased Social Services		BASELINE BUDGET		Social Services	General Fund	1	13390	IN	2.000	2.000	\$6,370,496	\$6,373,159
422	228	Purchased Social Services		BASELINE BUDGET		Social Services	Federal Expenditures Fund	1	13400	IN	0.000	0.000	\$4,382,844	\$4,382,844
423	228	Purchased Social Services		BASELINE BUDGET		Social Services	Other Special Revenue Funds	1	13410	IN	0.000	0.000	\$289,943	\$289,943
424	228	Purchased Social Services		BASELINE BUDGET		Social Services	Federal Block Grant Fund	1	13420	IN	1.000	1.000	\$11,475,968	\$11,477,016
425	716	Community Services Block Grant		BASELINE BUDGET		Social Services	Federal Block Grant Fund	1	14060	IN	1.000	1.000	\$4,930,744	\$4,935,354
431	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	General Fund	1	3480	IN	11.000	11.000	\$7,639,477	\$7,669,442
432	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	Federal Expenditures Fund	1	3490	IN	0.000	0.000	\$8,952,011	\$8,947,607
433	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	Federal Expenditures Fund	2	3500	IN	3.000	3.000	\$2,176,695	\$2,187,517
434	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	Other Special Revenue Funds	1	3510	IN	0.000	0.000	\$525,902	\$525,902
435	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	Other Special Revenue Funds	2	3520	IN	0.000	0.000	\$7,000	\$7,000

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
436	679	Office of Substance Abuse		BASELINE BUDGET		Substance Abuse	Federal Block Grant Fund	1	3530	IN	7.000	7.000	\$7,041,107	\$7,061,601
437	700	Driver Education and Evaluation Program - Substance Abuse		BASELINE BUDGET		Substance Abuse	General Fund	1	3600	IN	10.000	10.000	\$1,742,238	\$1,767,289
438	844	Office of Substance Abuse - Medicaid Seed		BASELINE BUDGET		Substance Abuse	General Fund	1	3970	IN	0.000	0.000	\$2,171,370	\$2,171,370
439	844	Office of Substance Abuse - Medicaid Seed		BASELINE BUDGET		Substance Abuse	Other Special Revenue Funds	1	3980	IN	0.000	0.000	\$636,083	\$636,083

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Major Policy Items - Tabled Change Package

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
25	731	Mental Health Services - Child Medicaid	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Children's Services	General Fund	17	3770	T CP	0.000	0.000	\$10,327,204	\$10,327,204
28	228	Purchased Social Services	C-A-7027	Reduces funding by revising the rates paid for child care.	The department will revise its rules to reduce State paid child care rates from 100% of the 75th percentile of the local market-rate survey to 50%.	<i>Info requested on: current and proposed rates, timing of market survey, how savings will be achieved; all child care assistance, children, providers, reimbursement rates, effects of reimbursement reduction; child care by region or county, private pay rates, acceptance of subsidies, % revenue from subsidies; TANF child care benefits; DHHS's obligations under Title 22, section 8308 and contract with child care providers; child care food program opportunities for coordination with DoEd, number of Head Start agencies, functions and possible overlap among Head Start, child care, other DHHS programs (eligibility, services, funding); Head Start funding sources, history, availability of ARRA funding to providers; and the need for state funding, MOE, access, regional equalization. CP to change savings est.</i>	Children's Services	General Fund	1	13440	T CP	0.000	0.000	(\$266,619)	(\$355,492)

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Major Policy Items - Tabled Change Package

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
57	705	Medicaid Services - Developmental Services	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. Info requested on populations, utilization, waiting lists, numbers aging out of school system each year, spending history, estimates of elderly caring for adult children with intellectual disabilities who will need assistance. Info requested on assessment of need, placement process off the waiver. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Developmt Services	General Fund	12	3670	T CP	0.000	0.000	\$7,320,412	\$7,320,412
200	420	Long Term Care - Human Services	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Info requested on effect of proposal on families, data on each category proposed for premium. Do some of these families already pay premiums, at what levels? Do some already pay co-pays, at what levels? Potential MOE problem with ACA? Is CMS likely to approve? Is statutory language needed?</i>	Elder Services	General Fund	1	13620	T CP	0.000	0.000	(\$745,000)	(\$745,000)
289	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	<i>Request baseline COS and RAC detail. Break out baseline change vs. DRG and APC adjustments. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	MaineCare Baseline Adjustment	General Fund	1	12790	T CP	0.000	0.000	\$74,446,764	\$71,287,576

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
296	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	<i>Allowed by ACA MOE? See Item 200 above on 4% premium. CP to amend initiative.</i>	MaineCare Eligibility/Recipients	General Fund	1	12980	T CP	0.000	0.000	(\$1,589,424)	(\$1,589,424)
299	147	Medical Care - Payments to Providers	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	<i>Request info on current spending - RAC codes and account coding. See Language KK. Info requested on immigration status of Maine residents (categories), health and other public assistance. Info requested on cut proposals in budget, effect on people, secondary effects on other eligibility, other people, municipalities, programs. Info requested on what other states provide for legal non-citizen residents. CP to revise savings assumption to \$2.6 million per year to maintain coverage for children and pregnant women under Medicaid (MOE).</i>	MaineCare Eligibility/Recipients	General Fund	1	13020	T CP	0.000	0.000	(\$8,825,231)	(\$8,825,231)
363	138	Temporary Assistance for Needy Families	C-A-7036	Reduces funding by implementing a full-family sanction for violation of program rules.	This initiative will achieve savings in the Temporary Assistance for Needy Families program by requiring participants to sign and comply with the family contract as a condition for eligibility in the program.	<i>See Language PP. Info requested on TANF and GA sanctions, history of sanction results, and for what noncompliance, history of appeals and results. CP to reallocate second year savings.</i>	Public Assistance	General Fund	1	11930	T CP	0.000	0.000	(\$1,250,000)	(\$2,500,000)
364	138	Temporary Assistance for Needy Families	C-A-7037	Reduces funding by implementing a strict 5-year time limit for recipients of assistance under the Temporary Assistance for Needy Families program.	This initiative reflects the savings associated with implementing a strict 5-year time limit for the TANF program. Individuals who are already at or over the 5-year limit on July 1, 2011 will have a 60 month grace period before their case is closed.	<i>See Language PP. One time savings? MOE implications? Info requested on other states' limits, strict and flexible limits, data on calculation of savings. Info requested on profiles, explanations for exceeding 60 months, # recipients with disabled children. Info requested on MOE requirements, process of calculating. CP to reallocate second year savings.</i>	Public Assistance	General Fund	1	11940	T CP	0.000	0.000	(\$1,250,000)	\$0

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Pos. Count	2013 Pos. Count	2012 Total \$ Impact	2013 Total \$ Impact
429	844	Office of Substance Abuse - Medicaid Seed	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	<i>Request baseline and adjustment details. CP may add \$13 million each year per DHHS. Amend to separate into three initiatives: Growth, DRG and APC.</i>	Substance Abuse	General Fund	1	4010	T CP	0.000	0.000	\$384,458	\$384,458
440	UU			Directs DHHS to pay child care at 50% of the 75 th percentile of local market rates effective 10/1/2011.		<i>See Children's Services, Purchased Social Services, Item 28.</i>					T CP				
444	WW			Extend Controlled Substances Prescription Monitoring Program to any controlled substance dispensed by a dispenser or prescriber.		<i>Info requested on computerized systems provide for communication between pharmacies about patients and situation in which the person uses MaineCare coverage at one pharmacy and pays cash at another. And see YY below. Will be removed in CP</i>					T CP				
445	YY			Prohibits a MaineCare member from paying with cash for a prescription drug that is covered by MaineCare.		<i>See WW above. Will be amended in CP</i>					T CP				
446	JJ			Limits eligibility for General Assistance to 1 1-month period per year. Changes reimbursement rate for municipalities who incur net GA costs over .03% of state valuation from 90% state match to 75% state match. Amends provision on reporting to State. Increases period of ineligibility for false representation of a material fact and for failure to comply with a work requirement from 120 to 180 days. Extends requirement to secure potential resources to Maine residents Property Tax Program. Amends period of ineligibility for failure to secure potential resource from "until makes good faith effort to secure the resource" to "120 days from date applicant abandons the resource." Extends period of ineligibility due to ineligibility for another program for "period of other program ineligibility" to "that period or 180 days, whichever is longer." Directs DHHS to work with municipalities to enhance their ability to determine eligibility.		<i>Initiative on GA eligibility 1x/yr withdrawn at PH. On other initiatives, see Public Assistance, GA, Item 358. Will be amended in CP.</i>					T CP				
450	PP			Imposes a strict 5 year limit on TANF eligibility, allowing an additional 6 months if the adults comply with all TANF participation requirements. Increases penalty for		<i>See Public Assistance, TANF, Item 364.</i>					T CP				

APPENDIX E
Report of the Minority of
the Health and Human Services Committee

SENATE

EARLE L. MCCORMICK, District 21, Chair
NICHI S. FARNHAM, District 32
MARGARET M. CRAVEN, District 16

JANE ORBETON, Legislative Analyst
ANNA BROOME, Legislative Analyst
LISA M. COTE, Committee Clerk



HOUSE

MEREDITH N. STRANG BURGESS, Cumberland, Chair
LESLIE T. FOSSEL, Alna
RICHARD S. MALABY, Hancock
BETH A. O'CONNOR, Berwick
DEBORAH J. SANDERSON, Chelsea
HEATHER W. SIROCKI, Scarborough
MARK W. EVES, North Berwick
MATTHEW J. PETERSON, Rumford
LINDA F. SANBORN, Gorham
PETER C. STUCKEY, Portland

State of Maine
ONE HUNDRED AND TWENTY-FIFTH LEGISLATURE
COMMITTEE ON HEALTH AND HUMAN SERVICES

MEMORANDUM

To: Sen. Richard W. Rosen, Senate Chair
Rep. Patrick S. A. Flood, House Chair
Joint Standing Committee on Appropriations and Financial Affairs

From: Sen. Margaret M. Craven
Rep. Mark Eves
Joint Standing Committee on Health and Human Services

Date: April 8, 2011

Re: Minority Report, Recommendations on LD 1043, An Act Making Unified Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds, and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2012 and June 30, 2013

The minority members of the Health and Human Services Committee are pleased to provide their report on the Biennial Budget Bill, LD 1043.

More than any other single piece of legislation that our committee will consider, the state budget is the most important. It sets the priorities for our state for the next two years, and its effects reach into every community and touch every life in Maine.

The committee has worked in good faith to understand the implications of the proposed changes to programs that protect Maine's most vulnerable residents. In some cases, the changes are being sought as ways to save money; in others, the changes are about philosophical assumptions. Despite our differences we believe our goals are the same – to build a better life for all Maine people – and together we must find constructive solutions that we can all agree upon.

After much deliberation, the signers of the minority report cannot support many of the changes to the budget as proposed. While the proposals may save the state budget money in the short-term, they will add long-term costs and then shift those additional burdens to other places within the state budget, to local governments and to the private and nonprofit sectors. Most importantly, they will do real harm to families who are struggling to build a better, more stable life for themselves.

Despite our opposition to these proposals, we take seriously our duty to help find a course of action that balances the state budget for the next two years, and we are working with the Department of Health and Human Services and others to find different approaches that will reduce costs to the General Fund and provide more appropriate services to the poor, the disabled, the young and the elderly.

To this end we direct you to two attachments:

- 1. Alternative General Fund Savings Initiative**
- 2. Comprehensive Public Assistance Proposal**

This is by no means an exhaustive list of alternatives, but rather beginning thoughts about how to achieve savings while protecting the most vulnerable residents in Maine. As the Appropriations Committee continues its important work on the state budget, we stand ready to assist in any way we can, and we know that the expertise of your committee can find a reasonable approach to the state budget that protects the poorest and most fragile among us while also safeguarding an economy that is beginning to re-emerge from recession.

Minority committee members are prepared to discuss this report with you. Thank you for your consideration.

Sincerely,



Senator Margaret M. Craven



Rep. Mark W. Eves

HHS Budget Report

Address General Fund Spending and Savings Initiatives with GF Spending and Savings:

Addressing “Savings” Initiatives (GF Savings)

Administrative Contracts

Realize savings from a thorough, fresh eyes review of administrative contracts, from the Commissioner's list of 45 contracts totaling almost \$30M in State funds. 10% saving per year

MaineCare Payment Reform

Systematic payment reform including but not limited to reduced reimbursements for preventable re-admissions, avoidable in-hospital complications, expanded chronic care management (taking advantage of all enhanced reimbursements and increased opportunities for 3rd party liability fairness in the ACA.

MaineCare Hospital Tax Rebasing

Update the hospital tax base year from 2008 to 2009.

Addressing Spending Initiatives

MaineCare Managed Care

From May 2010 Feasibility of Risk-based Contracting in the MaineCare Program report, projected annual savings of between \$21M and \$71M, w/startup costs of \$3.8M.

DRGs and APCs

Reduce initial baseline growth by and address phased in restoration as part of a comprehensive MaineCare provider payment strategy. Extend Part QQ hospital settlement cascade language to include FY13.

Addressing the Fund for a Healthy Maine

Address the projected FHM Shortfall within the FHM

Comprehensive Public Assistance Proposal: New Proposal to Direct Families to More Appropriate Services

TANF is one of the most important children's programs in the State. It provides very poor families with children help meet their basic needs, while offering parents job training and other services that help them get and keep jobs. General Assistance is the state's most basic safety net for very poor families and individuals with enough income to meet their basic needs. The great majority (86%) of General Assistance helps with housing costs to prevent homelessness.

Both programs serve large numbers of people with serious physical and mental health impairments. These programs have become the supports of last resort for families struggling to overcome disabilities that create significant employment barriers.

In the case of TANF, the great majority of families need assistance for a relatively short time. However, for the minority of families who receive assistance beyond 60 months, the vast majority have a family member with a disability.

We believe that there is a more appropriate and cost-effective way to serve many of these individuals that both saves general fund dollars and helps to stabilize families coping with disability. This strategy builds on last year's pilot that was extremely successful in expediting disability determinations for MaineCare by providing similar assistance to TANF and GA applicants and recipients.

A significant number of people in these programs have physical or mental health impairments significant enough to qualify for Supplemental Security Income (SSI) or Social Security Disability (SSD), but have not applied, or been successful in navigating that notoriously difficult process.

Data from the Social Security Administration show that more than two-thirds of all SSI applicants are initially denied. Many then do not further pursue eligibility. The data also show, however, that two-thirds who do pursue their claims are eventually successful and receive SSI. For those individuals determined to not qualify for SSI we must provide better assistance to those individuals with multiple work limiting barriers to obtain the services they need in order to find sustainable employment.

By implementing a program that identifies individuals with disabilities early in both the TANF and GA programs and then help them navigate the application process, we can ensure that families with longer-term needs receive more appropriate support. We propose to design this program in a manner that enables the state and municipalities to be reimbursed for the assistance that they provided while the individual's SSI application is pending. Currently the state does not do this for TANF families. As a result the federal government gets the financial benefit of the TANF dollars that the state provided to the family. In this proposal, the State would get this financial benefit. This strategy has been employed in other states with considerable success.

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Major Policy Items - Minority Report Back

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Minority Report back Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Total \$ Impact	2013 Total \$ Impact
24	137	IV-E Foster Care/Adoption Assistance	C-A-1432	Reduces funding based on prior year expenditure trends.	Expenditure trends in prior years and reductions in the number of children in state custody will allow the deappropriation without a reduction in services.	Oppose this initiative. Support retaining funding for services for children and families. Support deappropriating \$1,000,000/year from this account and appropriating it to Purchased Social Services for Maine Families Home Visiting, a community-based home visiting that works with first time families and adolescent parents for child asafety and well-being.	Children's Services	General Fund	1	11820	IN 8-5	(\$1,500,000)	(\$1,500,000)
25	731	Mental Health Services - Child Medicaid	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	Request breakout of growth estimates and underlying assumptions for expenditures attributable to DRG's, APC's, critical access hospitals that stay on the current payment system and other MaineCare expenditures.	Children's Services	General Fund	17	3770	T CP	\$10,327,204	\$10,327,204
28	228	Purchased Social Services	C-A-7027	Reduces funding by revising the rates paid for child care.	The department will revise its rules to reduce State-paid child care rates from 100% of the 75th percentile of the local market-rate survey to 50%.	Oppose these cuts as too subjective if highly skilled providers stop providing child care. Restore funding, perhaps from item 24.	Children's Services	General Fund	1	13440	T CP	(\$266,619)	(\$355,492)

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Minority Report back Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Total \$ Impact	2013 Total \$ Impact
57	705	Medicaid Services - Developmental Services	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	Request breakout of growth estimates and underlying assumptions for expenditures attributable to DRG's, APC's, critical access hospitals that stay on the current payment system and other MaineCare expenditures.	Developmt Services	General Fund	12	3670	T CP	\$7,320,412	\$7,320,412
196	927	Maine Rx Plus Program	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	Support amended version making MaineRx Plus self-supporting to provide the MaineCare discounted price to 9000 persons who use the program each year. More people may use the program if the Medicare Buy-in program ceases under items 231 and 452. See also Language item 441.	Elder Services	General Fund	1	14140	AMD	(\$105,815)	(\$105,815)
197	147	Medical Care - Payments to Providers	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	Ditto.	Elder Services	General Fund	1	12930	AMD	(\$29,500)	(\$29,500)
198	147	Medical Care - Payments to Providers	C-A-7024	Reduces funding to reflect the elimination of the Maine Rx Plus Program.	This initiative eliminates funding for the Maine Rx Plus Program. Administrative costs for the program have risen to the point that they exceed the value of benefits provided.	Ditto	Elder Services	Federal Expend. Fund	1	12940	AMD	(\$51,101)	(\$50,816)

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199	Z009	MR/Elderly PNMI Room and Board	C-A-7028	Reduces funding from savings by imposing a penalty for certain transfers of assets to qualify for state support for boarding home services.	The department will revise its rules related to the transfer of assets in the MaineCare Eligibility Manual in order to implement the option under Title 22, section 3174-A, which allows the imposition of a penalty for certain transfers of assets to obtain help with state-funded assistance in certain boarding home settings.	Oppose imposition of asset penalty when person is eligible for state-funded residential care and again later when person requires MaineCare funded nursing facility care. Have asked DHHS to articulate an alternate proposal that does not penalize people twice for one disqualifying transfer. See Language item 441.	Elder Services	General Fund	1	14530	IN	(\$216,000)	(\$216,000)
200	420	Long Term Care - Human Services	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	CP expected to articulate this proposal as continuing current cost-sharing by consumers but diverting the payments to the GF. Currently agencies serving the consumer retain the payments to provide services to 210 additional persons per year. Currently services are provided in the most appropriate, least expensive setting. Will cause longer waiting lists for 3 months or more, not serving 210 persons per year. Services will be delivered in more expensive institutional settings and this will cause job losses.	Elder Services	General Fund	1	13620	T CP	(\$745,000)	(\$745,000)
213	948	FHM - Substance Abuse	C-A-1477	Deallocates funds to segregate Medicaid match from match for other grant programs within the FHM - Substance Abuse program.	Funding in this account is used to match multiple grant awards. Transferring the Medicaid portion to a separate appropriation allows for better tracking of costs.		FHM	Fund for a Healthy Maine	1	4065	IN	(\$1,257,666)	(\$1,257,666)
214	948	FHM - Substance Abuse	C-A-1477	Allocates funds to segregate Medicaid match from match for other grant programs within the FHM - Substance Abuse program.			FHM	Fund for a Healthy Maine	2		IN	\$1,257,666	\$1,257,666

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Minority Report back Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Total \$ Impact	2013 Total \$ Impact
215	Z068	FHM - School Breakfast Program	C-A-25	Provides funding to reimburse those public schools that are providing breakfast for the cost of providing free breakfast to eligible students.	This initiative provides funding to reimburse those public schools kindergarten to grade 12 that provide breakfast for the amount equal to the difference between the federal reimbursement for a free breakfast and the federal reimbursement for a reduced-price breakfast for each student eligible for a reduced-price breakfast who is receiving breakfast. The number of students who qualify for reduced breakfasts, and participate in the program, has increased beyond current funding levels for the program. These additional funds are necessary to meet the demand and comply with the requirements of the statute.		FHM	Fund for a Healthy Maine	1	8390	IN	\$61,652	\$61,652
216	950	FHM - Health Education Centers	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose as this cut will endanger maintenance of health care worker clinical training sites, youth outreach, placements in rural and underserved areas and distance learning. Oppose as may put entire network at risk by removing state match for federal funds. Health education centers address significant healthcare workforce shortage. Served 332 healthcare workers from 7/09 to 4/11. Cut eliminates all funding in this account.	FHM	Fund for a Healthy Maine	2	10810	IN 8-5	(\$100,353)	(\$100,353)
217	951	FHM - Dental Education	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Provides loan repayment for dentists to work and stay in underserved areas. FAME has some funding remaining for 8 loan renewals, 3 new recipients in FY12, 2 new recipients in FY13. Cut eliminates all funding in this account.	FHM	Fund for a Healthy Maine	1	10840	IN 7-6	(\$237,740)	(\$237,740)
218	952	FHM - Quality Child Care	C-A-7000	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose. Funding pays for training and certification of child care workers, maximum \$700 per worker. Has assisted 200 workers to pursue education in FY11, enabling them to be listed on Maine Roads to Quality child care register. Leads to higher paid jobs, promotes higher quality child care and economic development. Proposed cut would eliminate the program.	FHM	Fund for a Healthy Maine	3	10870	IN 7-6	(\$143,629)	(\$143,629)
219	963	FHM - Judicial Department	C-A-7001	Eliminates one Diversion and Rehabilitation Coordinator position and related All Other to reflect the redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose. Cuts coordinator for Adult Drug Court, a position critical to the court's operation and to fidelity to accepted standards of this evidence-based program. Will lead to reduced efficacy and marginal outcomes. Saves over \$31 million over 10 years keeping people out of the corrections system. Proposed cut would eliminate all funding for this position.	FHM	Fund for a Healthy Maine	1	16570	IN 8-5	(\$115,534)	(\$118,387)
220	Z070	FHM - Dirigo Health	C-A-7003	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose decrease in subsidies (which this funding pays for) for persons who qualify under Dirigo Choice (8.8% of those covered) as that will increase overall health care costs. Eliminates all funding in this account.	FHM	Fund for a Healthy Maine	1	7350	IN 8-5	(\$4,291,311)	(\$4,291,311)

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221	964	FHM - Fire Marshal	C-A-7003	Eliminates 3 Public Safety Inspector II positions and reduces one Office Assistant II position funded 50% in the Fire Marshal - Office of program and 50% in the FHM - Fire Marshal program to part-time, funded in the Fire Marshal - Office of program, and eliminates related All Other funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose cuts and loss of inspectors. Oppose long delays for inspections, among others in businesses and child care facilities. Would leave no inspector in Aroostook, northern Penobscot, Washington and Cumberland Counties. Committee awaits Change Package to fund these positions, per Governor's Office. Cut would eliminate all FHM funding for this purpose.	FHM	Fund for a Healthy Maine	1	20440	T CP	(\$250,419)	(\$256,865)
222	949	FHM - School Nurse Consultant	C-A-7007	Eliminates one Education Specialist III position and related All Other to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose cut as it eliminates position of school nurse consultant, the only one in the state. Nurse consultant is critical, provides leadership, consultation, training, problem solving to isolated nurses in schools, is highly trained in childhood illnesses. Cut puts safety of children at risk Eliminates all funding for this position.	FHM	Fund for a Healthy Maine	10	8220	IN 8-5	(\$103,028)	(\$105,402)
223	948	FHM - Substance Abuse	C-A-7020	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose. Will cut 50% of prevention services statewide and \$1 spent on prevention saves \$18 over a student's lifetime. Cut will put Maine out of compliance with SAPT Block Grant MOE, causing loss of \$1,360,000 federal funds. Cut will cause loss of 212-225 beds of 10 residential SA treatment, leaving short-term detox, shifting costs to criminal justice, corrections, crisis centers, psych hospitals, homeless and emergency services and hospital emergency departments. Cut will cause loss of 200 jobs in community-based programs.	FHM	Fund for a Healthy Maine	1	4080	AMEND 8-5	(\$4,348,306)	(\$4,348,306)

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HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Minority Report back Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Total \$ Impact	2013 Total \$ Impact
224	953	FHM - Bureau of Health	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account. Oral health.	Cuts will end subsidies for dental care for low income people with no insurance, shifting costs to emergency departments of hospitals. Will destabilize community dental clinics, losing 20 jobs. Cut eliminates all funding for this program.	FHM	Fund for a Healthy Maine	1	14210	IN 7-6	(\$878,652)	(\$878,652)
225	953	FHM - Bureau of Health	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account. Home visiting.	Cuts will end all FHM funding for home visiting, which has served over 3000 families per year (21,000 home visits). Will cause loss of 79 jobs in community agencies. Cuts only remaining child abuse prevention program, for which ROI is \$7 for every \$1. DHHS has identified \$1,000,000/yr in child welfare funding that can be used for home visiting and may be able to secure \$667,000 in ACA home visiting funds if FHM cuts do not endanger federal MOE (pending legal question here). See item 24 for potential funding source. Cut eliminates all funding in this account.	FHM	Fund for a Healthy Maine	6	14220	IN 7-6	(\$4,653,383)	(\$4,653,383)
226	955	FHM - Bureau of Medical Services	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.		FHM	Fund for a Healthy Maine	1	14250	IN	(\$1,029)	(\$1,029)
227	956	FHM - Family Planning	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	Oppose. Cuts primary care for 4000-4500 persons per year, causing loss of other funding, loss of 20-25 community-based jobs, closure of 10-12 clinics, reduced hours elsewhere, increased sexually transmitted diseases, and possible doubling of teen pregnancy rates (Guttmacher Institute). Greatest impact will be in rural areas. Cuts all funding in this account.	FHM	Fund for a Healthy Maine	1	14280	IN 7-6	(\$401,430)	(\$401,430)
228	958	FHM - Donated Dental	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.	Oppose. Cuts funding for agency that arranges donations of dental services from 154 volunteer dentists and 44 volunteer labs to 68 patients last year. Since 1999 has served 808 patients with donated services and treatments of \$1,913, 204. Cut will eliminate all funding in this account.	FHM	Fund for a Healthy Maine	1	14340	IN 8-5	(\$36,463)	(\$36,463)
229	962	FHM - Bone Marrow Screening	C-A-7021	Reduces funding to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulting in the elimination of resources for this Fund for a Healthy Maine account.		FHM	Fund for a Healthy Maine	1	14450	IN	(\$80,218)	(\$80,218)

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230	957	FHM - Service Center	C-A-7022	Eliminates 4 Social Services Program Specialist I positions and one Office Associate II position and related All Other to reflect a redistribution of funding and the reduction of revenue available in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the elimination of resources for this Fund for a Healthy Maine program.	Oppose. Services provided by out-of-home abuse and neglect team are critical to child safety. DHHS has identified funding and will propose Change Package to retain all staff. Cut would eliminate all funding in this account.	FHM	Fund for a Healthy Maine	1	14310	T CP	(\$352,551)	(\$369,088)
231	Z015	FHM - Drugs for the Elderly and Disabled	C-A-7030	Reduces funding to reflect a redistribution of funding and the reduction of resources among the various programs previously funded in the Fund for a Healthy Maine.	Downward projections of revenue available in the 2012-2013 biennium and the redirection of resources among the various programs previously funded have resulted in the reduction of resources for this Fund for a Healthy Maine account.	Oppose. Cut will eliminate funding for Medicare Buy-in program, leaving 44,000 elderly and disabled persons without funding for their Medicare Part B and Part D coverage. Part B enrollees are 34% of all Medicare eligible individuals. Causes loss of \$33,000,000 in federal funds. Will cause use of higher cost services in hospitals and other facilities and offices, adding hundreds of dollars in new health care expenses to all payers including low-income seniors and persons with disabilities. Cut is 42% of entire amount of FHM. Oppose also language Part AAA, item 452. Legal question: MOE may be violated, endangering all federal Medicaid funding.	FHM	Fund for a Healthy Maine	1	14560	IN 8-5	(\$7,434,230)	(\$7,434,230)
232	960	FHM - Medical Care	C-A-7031	Provides funding to reflect a redistribution of funding within the Fund for a Healthy Maine.	A redirection of resources among the various programs within the Fund for a Healthy Maine will direct additional funding to the FHM - Medical Care program, and will allow for a reduction in General Fund resources for the Medical Care Payments to Providers program.		FHM	Fund for a Healthy Maine	1	14400	IN 8-5	\$17,702,706	\$17,666,348
233	921	Fund for a Healthy Maine		Extends the \$4,500,000 cap on transfers from net slot machine revenue to the FHM though the fiscal year ending June 30, 2013.		Oppose cap on racino funds to FHM for DEL. Other racino funding is not capped (we don't cap funds to horsemen altho some original funding was for start-up costs, why do we take the lifeline for the elderly and disabled?) and was intended by voters to go to FHM-DEL.	FHM	General Fund	1		IN 8-5	\$0	(\$1,101,895)
234	921	Fund for a Healthy Maine		Extends the \$4,500,000 cap on transfers from net slot machine revenue to the FHM though the fiscal year ending June 30, 2013.		Ditto.	FHM	Fund for a Healthy Maine	1		IN 8-5	\$0	\$1,101,895
235	921	Fund for a Healthy Maine		Repeals language requiring the transfer of funding from the FHM to offset the General Fund revenue loss associated with limiting the sale of certain flavored cigars and cigarettes.			FHM	General Fund	1		IN	\$161,786	\$164,751

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261	921	Fund for a Healthy Maine		Repeals language requiring the transfer of funding from the FHM to offset the General Fund revenue loss associated with limiting the sale of certain flavored cigars and cigarettes.			FHM	Fund for a Healthy Maine	1		IN	(\$161,786)	(\$164,751)
289	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	Request breakout of growth estimates and underlying assumptions for expenditures attributable to DRG's, APC's, critical access hospitals that stay on the current payment system and other MaineCare expenditures.	MaineCare Baseline Adjustment	General Fund	1	12790	T CP	\$74,446,764	\$71,287,576
290	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	Ditto.	MaineCare Baseline Adjustment	Federal Expend. Fund	1	12800	T CP	\$157,567,470	\$152,871,216

Proposed 2012-2013 Biennial Budget (LD 1043) - HHS Committee Programs - Major Policy Items - Minority Report Back

HHS #	Prog. Code	Program	Initiative Number	InitiativeText	Initiative Justification	Minority Report back Notes	Sort Subject	Fund	Unit	Sort Num.	HHS Vote	2012 Total \$ Impact	2013 Total \$ Impact
291	147	Medical Care - Payments to Providers	C-A-1405	Provides funding in the MaineCare program to reflect enrollment growth and the conversion of payments to hospitals from a prospective interim payment methodology to payments based on diagnosis-related groupings and ambulatory patient classifications.	This initiative includes funding to address expenditure growth in the MaineCare program and is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13. It also provides funding to implement the conversion of the prospective interim payment methodology for payments to noncritical access hospitals to methodologies based on diagnosis-related groupings in the case of hospital inpatient services and ambulatory patient classifications in the case of hospital outpatient services.	Ditto.	MaineCare Baseline Adjustment	Federal Block Grant Fund	1	12810	T CP	\$2,409,251	\$2,409,251
292	147	Medical Care - Payments to Providers	C-A-1198	Reduces funding by changing the disability determination cutoff from 45 days to 90 days.	A court decision in the '70s required that a disability determination be made in 45 days. After 45 days, the person becomes eligible for temporary coverage which is 100% state-funded. In the '80s, the federal law required the decision in 90 days and then required temporary coverage. This initiative reflects the savings from requiring that the determination be made in 90 days to mirror federal law.	Support alternative proposal of expanding the pilot project of the medical review team to statewide with 15 staff to assist applicants with paperwork and requirements for eligibility, keeping the 45-day requirement. 45-day period helps to prevent further deterioration of health status for those already suffering from serious health conditions by ensuring that they have access to appropriate services more promptly. 90-day period will cost shift to hospitals, municipalities, individuals. Concern about the uncertainty of the <i>Polk</i> federal court settlement that still requires 45 days (if not successful in court will have \$6million hole in budget). Alternative proposal will generate \$4,007,550 in savings in FY12 and \$4,811,400 in savings in FY13 after paying costs for staff. Legal issue: risk of MOE violation, possibly endangering all federal Medicaid funds.	MaineCare Eligibility/ Recipients	General Fund	1	12770	AMEND 8-5	(\$3,000,000)	(\$6,000,000)
293	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	Oppose. Ends access to health care for 14,000 parents, causing cost shift to other entities. Coverage for parents has been successful welfare reform strategy, providing coverage for working parents. Legal question. Concern regarding MOE for ACA. DHHS stated intent to proceed with freeze immediately upon enactment. Need federal CMS application for certification and waiver. May endanger all federal Medicaid funds if certification and waiver are not granted.	MaineCare Eligibility/ Recipients	General Fund	1	12950	IN 8-5	(\$2,578,166)	(\$5,916,288)

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294	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	Ditto.	MaineCare Eligibility/Recipients	Federal Expend. Fund	1	12960	IN 8-5	(\$6,212,362)	(\$12,275,152)
295	147	Medical Care - Payments to Providers	C-A-7025	Reduces funding by freezing enrollment in the MaineCare program for parents of children whose family income levels exceed 133% of the federal poverty level.	This initiative will freeze enrollment for parents of children whose income levels exceed 133% of the federal poverty level. It is expected that over the biennium, the number of participants will be reduced by approximately 25%.	Ditto.	MaineCare Eligibility/Recipients	Other Special Rev. Funds	3	12970	IN 8-5	(\$1,008,150)	(\$1,209,780)
296	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	Reserving comment for Change Package proposal.	MaineCare Eligibility/Recipients	General Fund	1	12980	T CP	(\$1,589,424)	(\$1,589,424)
297	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	Ditto.	MaineCare Eligibility/Recipients	Federal Expend. Fund	1	12990	T CP	(\$231,316)	(\$230,025)
298	147	Medical Care - Payments to Providers	C-A-7029	Reduces funding by imposing a 4% premium on family income for several department programs.	This initiative achieves savings from a 4% premium on family income that will be imposed for families receiving services from the Cub Care, Katie Beckett, Medicaid Buy-in, Home-based Care, Homemaker Services and the Low-cost Drugs for the Elderly programs.	Ditto.	MaineCare Eligibility/Recipients	Federal Block Grant Fund	1	13000	T CP	(\$4,226,735)	(\$4,206,842)

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299	147	Medical Care - Payments to Providers	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	Reserving comment for Change Package proposal.	MaineCare Eligibility/ Recipients	General Fund	1	13020	T CP	(\$8,825,231)	(\$8,825,231)
321	147	Medical Care - Payments to Providers	C-A-7032	Reduces funding that is available as the result of a redistribution of resources within the Fund for a Healthy Maine.	Resources within the Fund for a Healthy Maine have been redistributed with a greater share being allocated to the FHM - Medical Care program, allowing for a deappropriation from the Medical Care - Payments to Providers program, General Fund account.		MaineCare Other	General Fund	1	13010	IN 8-5	(\$17,705,645)	(\$17,684,183)
358	130	General Assistance - Reimbursement to Cities and Towns	C-A-7026	Reduces funding by reducing the level of reimbursement to municipalities.	When a municipality incurs net general assistance costs that exceed .0003 of its most recent state valuation, the department is required to reimburse the municipality for 90% of the excess amount. This initiative reduces the reimbursement to 75% of the excess amount.	Reserve comment.	Public Assistance	General Fund	1	11710	OUT 7-6	(\$701,250)	(\$701,250)

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359	131	State Supplement to Federal Supplemental Security Income	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	Oppose. 78 frail elderly and disabled Maine people (some are refugees in the US for more than 7 years) will lose assistance, putting them at risk. Will increase homelessness and emergency room use. Legal question: may violate US Constitution Equal Protection clause under cases of <i>Pimentel v. Dreyfus</i> (Washington) and <i>Korab v. Koller</i> (Hawaii). See Language item 448.	Public Assistance	General Fund	1	11750	IN 8-5	(\$367,900)	(\$367,900)
360	138	Temporary Assistance for Needy Families	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	Oppose. 62 households, many including children, will lose assistance, causing inability to pay rent and meet costs, causing negative impact on local economies. Will increase homelessness and put children at risk. Legal question: may violate US Constitution Equal Protection clause under cases of <i>Pimentel v. Dreyfus</i> (Washington) and <i>Korab v. Koller</i> (Hawaii) See Language item 448.	Public Assistance	General Fund	1	11910	IN 8-5	(\$157,320)	(\$157,320)
361	2019	Food Supplement Administration	C-A-7034	Reduces funding by limiting benefits provided to legal noncitizens who have been in the United States for less than 5 years.	This initiative eliminates benefits provided to legal non-citizens who have been in the United States for less than 5 years. Funding for TANF, food supplements, supplemental security income and medical and financial assistance will be eliminated.	Oppose. 611 individuals/families will lose assistance to buy necessary food, causing negative impact on local economies. Legal question: may violate US Constitution Equal Protection clause under cases of <i>Pimentel v. Dreyfus</i> (Washington) and <i>Korab v. Koller</i> (Hawaii). See Language item 448.	Public Assistance	General Fund	1	14600	IN 8-5	(\$420,000)	(\$420,000)
362	138	Temporary Assistance for Needy Families	C-A-7035	Reduces funding for Temporary Assistance for Needy Families assistance for individuals convicted of drug-related felonies.	Convicted drug felons will be required to submit proof of regular drug testing to be eligible for assistance under the TANF program. Failure to provide such proof or a positive drug test will result in immediate termination of assistance.	This proposal unfairly presumes all parents with prior drug felonies will be repeat offenders indefinitely. People with drug addictions need assistance to overcome their addiction. Taking away help will harm the possibility of future recovery. False positives are common, requiring retesting at additional expense and bringing the potential for inaccurate terminations for the family.	Public Assistance	General Fund	1	11920	IN 8-5	(\$50,000)	(\$50,000)
363	138	Temporary Assistance for Needy Families	C-A-7036	Reduces funding by implementing a full-family sanction for violation of program rules.	This initiative will achieve savings in the Temporary Assistance for Needy Families program by requiring participants to sign and comply with the family contract as a condition for eligibility in the program.	Reserve comment.	Public Assistance	General Fund	1	11930	T CP	(\$1,250,000)	(\$2,500,000)

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364	138	Temporary Assistance for Needy Families	C-A-7037	Reduces funding by implementing a strict 5-year time limit for recipients of assistance under the Temporary Assistance for Needy Families program.	This initiative reflects the savings associated with implementing a strict 5-year time limit for the TANF program. Individuals who are already at or over the 5-year limit on July 1, 2011 will have a 60 month grace period before their case is closed.	Reserve comment.	Public Assistance	General Fund	1	11940	T CP	(\$1,250,000)	\$0
387	Z008	Maternal and Child Health Block Grant Match	C-A-1409	Reduces funding for recruitment and outreach in the Maine breast and cervical health program.	Reduces funding for recruitment and outreach in the Maine Breast and Cervical Health Program (BCHP). This money was dedicated to funding six contracts with community agencies to conduct BCHP recruitment and outreach. Current emphasis of BCHP is now on increasing screenings, and contract functions are no longer meeting the program needs. Contracts were terminated 6/29/2010 and no plans are in place to renew them.		Public Health	General Fund	1	14480	IN 7-6	(\$60,000)	(\$60,000)
429	844	Office of Substance Abuse - Medicaid Seed	C-A-7010	Provides funding for the growth in the MaineCare program.	The expenditure growth is based on increased enrollment by category times the average per member per month cost and totals \$137.6 million in fiscal year 2011-12 and \$137.9 million in fiscal year 2012-13.	Request breakout of growth estimates and underlying assumptions for expenditures attributable to DRG's, APC's, critical access hospitals that stay on the current payment system and other MaineCare expenditures.	Substance Abuse	General Fund	1	4010	T CP	\$384,458	\$384,458

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Language													
Group B													
440	UU			Directs DHHS to pay child care at 50% of the 75 th percentile of local market rates effective 10/1/2011.		Oppose. See item 28.					T CP		
Group E													
441	SS			Repeals Maine RxPlus program.		Agree to amended language, making program self-supporting. See items 196, 197, 198.					AMD		
442	MM			Directs DHHS to amend asset transfer rules for long-term care for state-funded assistance in certain board home settings, per Title 22, section 3174-A.		Oppose double penalty. Have asked DHHS to articulate an alternate proposal that does not penalize people twice for one disqualifying transfer. See item 199.					IN 12-1		
Group G													
443	NN			DHHS directed to convene working group to develop a plan and implementing legislation regarding the future role and structure of DDPC effective 6/30/12. AFA and HHS Committees to submit legislation to implement the plan in Second Regular Session, 2012.							AMD		
Group H													
444	WW			Extend Controlled Substances Prescription Monitoring Program to any controlled substance dispensed by a dispenser or prescriber.		Change Package will remove initiative.					T CP		
445	YY			Prohibits a MaineCare member from paying with cash for a prescription drug that is covered by MaineCare.		Reserve comment, waiting for Change Package.					T CP		
Group I													
446	JJ			Limits eligibility for General Assistance to 1 1-month period per year. Changes reimbursement rate for municipalities who incur net GA costs over .03% of state valuation from 90% state match to 75% state match. Amends provision on reporting to State. Increases period of ineligibility for false representation of a material fact and for failure to comply with a work requirement from 120 to 180 days. Extends requirement to secure potential resources to Maine residents Property Tax Program. Amends period of ineligibility for failure to secure potential resource from "until makes good faith effort to secure the resource" to "120 days from date applicant abandons the resource." Extends period of ineligibility due to ineligibility for another program for "period of other program ineligibility" to "that period or 180 days, whichever is longer." Directs DHHS to work with municipalities to enhance their ability to determine eligibility.		Reserve comment.					T CP		
447	RR			Extends period of time for DHHS to determine eligibility for assistance based on disability from 45 to 90 days. Requires issuance of temporary medical card at day 91. In other cases provides for temporary medical card at day 46.		Oppose. See item 292.					IN 8-5		

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448	KK			Repeals DHHS food supplement program for legal noncitizens. Repeals DHHS supplemental security income for legal noncitizens. Repeals DHHS discretion to provide medical and financial assistance to persons who would be eligible for TANF or MaineCare but for their citizenship status.		Oppose. See items 359, 360, 361. See also item 299.					IN 8-5		
449	LL			Amends state law allowing TANF eligibility for a person with a drug-related felony, adding a requirement of submitting proof of regular drug testing with disqualification		Reserve comment. See item 362.					IN 8-5		
450	PP			Imposes a strict 5 year limit on TANF eligibility, allowing an additional 6 months if the adults comply with all TANF participation requirements. Increases penalty for		TCP					TCP		
451	TT			Directs DHHS, as soon as federal Medicaid law allows, to revise the rules on the calculation of income for MaineCare eligibility purposes to use a standard 5% disregard.		Oppose. Not needed this biennium. No guidance from CMS. Inconsistent with ACA. Consequences not clear.					IN 8-5		
452	AAA			DHHS directed to amend rules for Medicare Buy-in program to reduce income eligibility to the optional minimal levels required in federal law. DHHS directed to determine if laws need to be changed to do this, submit legislation to Second Regular		Oppose. See item 231.					IN 8-5		
			Group J										
453	XX			Revisor directed to change name of MaineCare to Medicaid.							IN 7-6		
			Group K										
			Group L										
458	II			Regarding Fund for a Healthy Maine (FHM) extends cap on racino money to FHM o \$4.5m through FY13, repeals nonsupplantation language in FHM Title 22, section 1511, repeals provision related to ban on some flavored tobacco products that requires FHM money to offset loss of tobacco tax revenues from those sales.		Oppose extending racino cap. See items 233 and 234. Oppose repeal of nonsupplantation language. Oppose FHM cuts that are used to meet needs in GF programs, most immediately the MAP account. Support significant savings in MAP account					IN 8-5 II-1; IN 7-6 II-2; IN 13-0 II-3		
459	NN			Repeals school nurse consultant position.		Oppose. See item 222.					IN 8-5		