



# 130th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2021

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Legislative Document

No. 265

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S.P. 114

In Senate, February 1, 2021

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### An Act To Provide Women Access to Affordable Postpartum Care

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Received by the Secretary of the Senate on January 28, 2021. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed.

A handwritten signature in black ink, appearing to read 'D M Grant'.

DAREK M. GRANT  
Secretary of the Senate

Presented by Senator CARNEY of Cumberland.  
Cosponsored by Representative TALBOT ROSS of Portland and  
Senators: BREEN of Cumberland, BRENNER of Cumberland, CLAXTON of Androscoggin,  
MOORE of Washington, Representatives: MEYER of Eliot, PERRY of Calais, WHITE of  
Waterville.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §3174-G, sub-§1, ¶A**, as enacted by PL 1999, c. 731, Pt. OO,  
3 §1, is amended to read:

4 A. A qualified woman during her pregnancy and up to ~~60 days~~ 12 months following  
5 delivery when the woman's family income is equal to or below 200% of the nonfarm  
6 income official poverty line;

7 **Sec. 2. 22 MRSA §3174-G, sub-§1, ¶G**, as amended by IB 2017, c. 1, Pt. A, §2,  
8 is further amended to read:

9 G. A person who is a noncitizen legally admitted to the United States to the extent that  
10 coverage is allowable by federal law if the person is:

11 (1) A woman during her pregnancy and up to ~~60 days~~ 12 months following  
12 delivery; or

13 (2) A child under 21 years of age; and

14 **Sec. 3. Federal Medicaid waivers or state plan amendments; cost**  
15 **neutrality.** The Department of Health and Human Services shall, no later than January  
16 1, 2022, submit requests for any waivers or state plan amendments to the United States  
17 Department of Health and Human Services, Centers for Medicare and Medicaid Services  
18 determined necessary in order to accomplish the purposes of this Act. The department shall  
19 take all reasonable and necessary steps to seek approval of the waiver or state plan  
20 amendment. The department shall demonstrate cost neutrality in the waiver or state plan  
21 amendment, including, but not limited to, using savings from premium tax credits on health  
22 insurance obtained through the health insurance marketplace for which MaineCare  
23 members receiving services under this Act would be eligible, savings on limited family  
24 planning coverage and any other source of savings.

25 **Sec. 4. Funding.** In order to implement those sections of this Act that amend the  
26 Maine Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G, if the  
27 United States Department of Health and Human Services, Centers for Medicare and  
28 Medicaid Services does not grant a waiver or state plan amendment under section 3, the  
29 Department of Health and Human Services shall use federal funds first, if allowable under  
30 federal law, and then shall use the General Fund.

31 **Sec. 5. Rulemaking.** Within 180 days after receiving a decision regarding coverage  
32 by the United States Department of Health and Human Services, Centers for Medicare and  
33 Medicaid Services pursuant to a request in accordance with section 3, the Department of  
34 Health and Human Services shall adopt rules to implement the Maine Revised Statutes,  
35 Title 22, section 3174-G, subsection 1, paragraphs A and G. Rules adopted pursuant to this  
36 section are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. Upon  
37 adoption of the rules, the Commissioner of Health and Human Services shall notify the  
38 Secretary of State, the Secretary of the Senate, the Clerk of the House of Representatives  
39 and the Revisor of Statutes.

40 **Sec. 6. Report.** The Department of Health and Human Services shall report quarterly  
41 to the joint standing committee of the Legislature having jurisdiction over health and  
42 human services matters, beginning April 1, 2022, on the department's progress in seeking  
43 a waiver or state plan amendment under section 3 until the process is complete. The joint

1 standing committee of the Legislature having jurisdiction over health and human services  
2 matters is authorized to report out a bill to the Legislature regarding each report.

3 **Sec. 7. Contingent effective date.** Those sections of this Act that amend the Maine  
4 Revised Statutes, Title 22, section 3174-G, subsection 1, paragraphs A and G do not take  
5 effect until the adoption of rules pursuant to section 5.

## 6 SUMMARY

7 This bill extends from 60 days to 12 months the period of time following delivery of a  
8 baby that a woman may be eligible for services under MaineCare. The bill directs the  
9 Department of Health and Human Services to submit a waiver or state plan amendment  
10 request no later than January 1, 2022 to the United States Department of Health and Human  
11 Services, Centers for Medicare and Medicaid Services to implement the provisions of this  
12 legislation that extend MaineCare coverage to a woman following delivery of a baby from  
13 60 days to 12 months. The department is required to take all reasonable and necessary  
14 steps to seek approval of the waiver or state plan amendment. In the event the waiver or  
15 state plan amendment is not granted, the department is directed to implement the coverage  
16 provisions using federal funds, if allowable, and then using the General Fund. The  
17 department is directed to adopt rules no later than 180 days after receiving a decision from  
18 the United States Department of Health and Human Services, Centers for Medicare and  
19 Medicaid Services to approve or deny the waiver or state plan amendment. The department  
20 is required to report on a quarterly basis beginning April 1, 2022 to the joint standing  
21 committee of the Legislature having jurisdiction over health and human services matters  
22 its progress in seeking a waiver or state plan amendment until the process is complete. The  
23 committee is authorized to report out legislation related to each report.