S.P. 12

In Senate, January 13, 2021

An Act Concerning the Reporting of Health Care Information or Records to the Emergency Medical Services' Board

Submitted by the Department of Public Safety pursuant to Joint Rule 204. Received by the Secretary of the Senate on January 11, 2021. Referred to the Committee on Health Coverage, Insurance and Financial Services pursuant to Joint Rule 308.2 and ordered printed.

Presented by Senator SANBORN, H. of Cumberland.
Be it enacted by the People of the State of Maine as follows:

Sec. 1. 32 MRSA §88, sub-§2, ¶K is enacted to read:

K. The board may collect or receive health care information or records, including information or records that identify or permit identification of any patient, for the purpose of monitoring and improving the provision of emergency medical services and health outcomes within the State.

Sec. 2. 32 MRSA §91-B, sub-§1, ¶E is enacted to read:

E. Health care information or records provided to the board under section 88, subsection 2, paragraph K are confidential if the information or records identify or permit the identification of a patient or a member of that patient's family.

Sec. 3. 32 MRSA §91-B, sub-§1, ¶F is enacted to read:

F. Health care information or records provided to the board under section 96 are confidential if the information or records identify or permit the identification of a patient who received emergency medical treatment or a member of that patient's family.

Sec. 4. 32 MRSA §96 is enacted to read:

§96. Monitoring and improving the provision of emergency medical services and health outcomes

For the purpose of monitoring and improving the provision of emergency medical services and health outcomes within the State, the board may request and collect health care information or records, including information or records that identify or permit identification of any patient, concerning individuals who have received emergency medical treatment within the State, except for any information or records identifying a patient, in any format, that include HIV or AIDS status or test results or that relate to referral, treatment or services for a behavioral or mental health disorder or substance use disorder.

1. Reporting by hospitals and physicians. Hospitals and physicians shall report health care information or records concerning individuals who have received emergency medical treatment as follows and in accordance with this section and rules adopted by the board.

A. A hospital shall report to the board health care information or records requested by the board, including information or records that identify or permit identification of any patient, concerning an individual under or formerly under that hospital's care who received emergency medical treatment.

B. A physician shall report to the board health care information or records requested by the board, including information or records that identify or permit identification of any patient, concerning an individual under or formerly under that physician's care who received emergency medical treatment.

2. Access to health care information or records through a state-designated statewide health information exchange or direct reporting. A hospital or physician may satisfy the board's request for health care information or records under subsection 1 as follows.
A. A hospital or physician that participates in a state-designated statewide health
information exchange as described in Title 22, section 1711-C may satisfy the board's
request for health care information or records by authorizing the board to retrieve that
hospital’s or physician's data from the health information exchange.

B. A hospital or physician that participates in a state-designated statewide health
information exchange as described in Title 22, section 1711-C that does not authorize
the board to retrieve that hospital's or physician's data from the health information
exchange shall provide the health care information or records to the board directly in
the manner specified by rule.

3. Health care information and records requested. When requesting health care
information or records pursuant to this section and any rules adopted by the board, the
board shall request only the minimum amount of information or number of records
necessary to fulfill the purposes of this section.

4. No liability for hospital or physician reporting in good faith. A hospital or
physician that reports in good faith in accordance with this section is not liable for any civil
damages for making the report.

5. Rulemaking. The board shall adopt rules regarding the collection and reporting of
health care information and records pursuant to this section, including, but not limited to,
the frequency of reporting by hospitals and physicians. Rules adopted pursuant to this
subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

Sec. 5. Rulemaking by the Emergency Medical Services' Board. In adopting
rules pursuant to the Maine Revised Statutes, Title 32, section 96, subsection 5, the
Department of Public Safety, Maine Emergency Medical Services, Emergency Medical
Services' Board shall address the following issues:

1. How different quality initiatives are adopted by the board;
2. How providers are notified about the different quality initiatives in subsection 1;
3. How providers communicate their decisions to the board to authorize a state-
designated statewide health information exchange as described in Title 22, section 1711-C
to provide health care information or records to the board;
4. For providers who authorize a state-designated statewide health information
exchange to provide health care information or records to the board, the manner in which
a provider may revoke that authorization; and
5. How health care information or records remitted from a state-designated statewide
health information exchange to the board and data remitted from the board to any 3rd
parties are tracked and reported to providers when data requests are made to the state-
designated statewide health information exchange.

The rules must include a requirement that any executed agreements must be made
available to providers if any 3rd parties are provided health care information or records
under those agreements.

SUMMARY

This bill allows the Department of Public Safety, Maine Emergency Medical Services,
Emergency Medical Services' Board to request and collect health care information or
records, including information or records that identify a patient. The bill also requires
hospitals and physicians, upon request by the board for the purpose of monitoring and
improving the provision of emergency medical services and health outcomes, to provide
health care information or records concerning individuals who have received emergency
medical treatment, except for information or records that include HIV or AIDS status or
test results or that relate to referral, treatment or services for a behavioral or mental health
disorder or substance use disorder.

The bill makes the reportable health care information or records confidential.

The bill also requires the board to adopt routine technical rules related to quality
initiatives adopted by the board, the authorization and revocation of authorization for a
state-designated statewide health information exchange to provide health care information
and records to the board and the tracking of health care information and records provided
by the exchange to the board.