



125th MAINE LEGISLATURE

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Legislative Document

No. 1467

H.P. 1076

House of Representatives, April 12, 2011

An Act To Improve Timely Access to Health Care Data

(EMERGENCY)

Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

A handwritten signature in cursive script that reads "Heather J.R. Priest".

HEATHER J.R. PRIEST
Clerk

Presented by Representative CAIN of Orono.
Cosponsored by Senator CRAVEN of Androscoggin and
Representatives: EVES of North Berwick, PETERSON of Rumford, STRANG BURGESS of
Cumberland, STUCKEY of Portland, Senator: ROSEN of Hancock.

1 **Emergency preamble. Whereas,** acts and resolves of the Legislature do not
2 become effective until 90 days after adjournment unless enacted as emergencies; and

3 **Whereas,** this bill establishes the Health Information Database Advisory Group to
4 advise the Maine Health Data Processing Center and the Maine Health Data Organization
5 on the maintenance and updating of the all-payor and all-setting health care database
6 system; and

7 **Whereas,** this bill requires the Health Information Database Advisory Group to
8 submit its recommendations no later than January 1, 2012; and

9 **Whereas,** immediate enactment of this bill is necessary to give the Health
10 Information Database Advisory Group adequate time to fulfill its duties; and

11 **Whereas,** in the judgment of the Legislature, these facts create an emergency within
12 the meaning of the Constitution of Maine and require the following legislation as
13 immediately necessary for the preservation of the public peace, health and safety; now,
14 therefore,

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

16 **Sec. 1. 10 MRSA §682-A** is enacted to read:

17 **§682-A. Health information database; access to data**

18 **1. Database.** Under the direction of the Health Information Database Advisory
19 Group, established in subsection 2, the center, established in section 681, in conjunction
20 with the Maine Health Data Organization, established in Title 22, chapter 1683, and
21 Onpoint Health Data shall maintain and update the all-payor and all-setting health care
22 database system to improve timely access to data in accordance with the following.

23 A. An independent manager of the center must be appointed to manage the
24 processing of the database in a neutral manner. Only one system for processing the
25 database and establishing central data files may be supported.

26 B. All current requirements for claims submissions must be maintained, except that
27 the requirement that payors submit dental claims and the requirement that small
28 commercial payors covering 50 to 499 lives submit claims must be evaluated.

29 C. The MaineCare and Medicare programs, to the extent permitted under federal
30 law, shall submit claims data through the same processing system and in the same
31 manner as commercial payors.

32 D. Health plans must be required to submit provider contact information, including
33 address and physical location, and expanded personal health care information related
34 to claims data using 2-way encryption technology or other technology to protect the
35 confidentiality of the information.

36 E. New performance standards must be implemented to improve the timeliness of the
37 data, including changes to filing requirements, standardized reporting and the
38 development of a database repository. If performance standards recommended by the

1 Health Information Database Advisory Group established in subsection 2 are not met,
2 the Health Information Database Advisory Group is authorized through a competitive
3 bidding process to contract with a qualified independent entity for services that meet
4 the performance standards established in accordance with this paragraph.

5 F. Standards for reporting from the database must be updated with the input of
6 stakeholders, including payors, providers and organizations seeking access to the
7 database.

8 G. The assessments charged to payors and providers submitting claims data must be
9 reduced to reflect updates made in accordance with this section.

10 H. User licenses must be established to provide access to the database by qualified
11 licensees.

12 The Maine Health Data Organization may adopt or amend its rules as necessary to
13 implement the requirements of this subsection. Rules adopted pursuant to this subsection
14 are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A.

15 **2. Health Information Database Advisory Group established.** The Health
16 Information Database Advisory Group, referred to in this subsection as "the advisory
17 group," is established to advise the center and the Maine Health Data Organization,
18 established in Title 22, chapter 1683, on the maintenance and updating of the all-payor
19 and all-setting health care database system to improve timely access to data in accordance
20 with subsection 1.

21 A. The advisory group is composed of 9 members appointed as follows:

22 (1) Four members appointed by the Governor as follows:

23 (a) One member representing a statewide health management coalition;

24 (b) Two members representing public or private employers; and

25 (c) One member representing hospitals;

26 (2) Two members appointed by the President of the Senate, one member
27 representing physicians and one member representing health plans;

28 (3) Two members appointed by the Speaker of the House, one member who has
29 expertise in health data and one member who represents consumers; and

30 (4) The Director of the Maine Quality Forum or the director's designee, who
31 serves as an ex officio voting member of the board.

32 B. The terms, compensation and chair of the advisory group are established as
33 follows.

34 (1) The members of the advisory group are appointed for terms of 5 years.
35 Members may serve beyond their designated terms until their successors are
36 appointed.

37 (2) Public members not otherwise compensated by their employers or other
38 entities that they represent are entitled to receive reimbursement of necessary
39 expenses.

