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## *Testimony of Rep. Tepler presenting*

### **LD 274: Resolve, Directing the Maine Health Data Organization To Determine the Best Methods and Definitions To Use in Collecting Data To Better Understand Racial and Ethnic Disparities in the Provision of Health Care in Maine**

Senator Sanborn and distinguished colleagues of the Health Coverage Insurance and Financial Services Committee, I am pleased to present to you LD 274: Resolve, Directing the Maine Health Data Organization To Determine the Best Methods and Definitions To Use in Collecting Data To Better Understand Racial and Ethnic Disparities in the Provision of Health Care in Maine. It is my hope that this bill can help us develop information that will lead to a better, more fair and equitable system of healthcare provision in Maine.

I was shocked this summer to hear from Dr. Shah, and read in newspapers, that Maine, one of the whitest states in the U.S., was also the state with the greatest racial and ethnic disparities in the COVID pandemic. (At the end of my testimony you can find links to two of the newspaper articles.) As elsewhere in our country, the spread of COVID-19 revealed inequalities in the provision of healthcare that were already present but that we had failed to notice and to comprehend their impact.

The time has come for us to wrestle with these disparities, understand where they are present, and how we can best ameliorate them. This bill suggests a path for doing so.

We are fortunate in Maine to have the Maine Health Data Organization (MHDO), which collects data from insurers and maintains an all claims/all payers database. However, the data the MHDO currently collects is largely not identified by race or ethnicity. Before writing this bill, I had a long conversation with Karynlee Harrington, the Executive Director of the MHDO regarding this fact. Ms. Harrington had already been in conversation with other healthcare data experts around the country regarding racial and ethnic disparities. She wants the data that is collected to reflect the best possible science.

To that end, the MHDO needs time to work with other organizations around the country to determine the best methods for revealing helpful information about these inequalities. In addition, she would like to make our data comparable with data from other states, so MHDO needs to determine the best definitions of racial and ethnic categories to be used. This bill is hopefully a beginning of a process of developing a dataset that will allow to understand where racial and ethnic inequalities play out in our healthcare system. We cannot fix what is broken until we have evidence of where and how it is broken.

In October, the MHDO will report back to this committee a determination as to which methods and definitions they believe it is best to adopt. In the next session this committee then can choose to submit a committee bill to require the reporting entities to provide that information to the database, and perhaps to also request another report in one or two years time regarding the realities that the data reveals. Let us begin to seek the answer.

Thank you for your time and consideration. I am happy to answer any questions that I can.

<https://www.pressherald.com/2020/06/21/maine-has-nations-worst-covid-19-racial-disparity/>

<https://www.bostonglobe.com/2020/06/21/nation/maine-has-widest-coronavirus-racial-disparity-gap-country/>