**90-590**

**MAINE HEALTH DATA ORGANIZATION**

2019 – 2020 Regulatory Agenda

AGENCY UMBRELLA UNIT NUMBER: **90-590**

AGENCY NAME: **Maine Health Data Organization (MHDO)**

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**EMERGENCY RULES ADOPTED SINCE THE LAST REGULATORY AGENDA:** None

**EXPECTED 2019-2020 RULE-MAKING ACTIVITY:**

**CHAPTER 10:** Determination of Assessments *(Routine Technical)*

STATUTORY BASIS: 22 M.R.S.A., §§ 8704, sub-section 4, 8706, sub-section 2, and PL 2019, c470.

PURPOSE: These rules will be amended to add prescription drug manufacturers, wholesale drug distributors and pharmacy benefit managers to the list of health care services entities required to pay annual assessments to support the operational costs of the MHDO.

SCHEDULE FOR ADOPTION: Spring 2020

AFFECTED PARTIES:All parties who request, access, and utilize data from the MHDO.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 100:** Enforcement Procedures *(Major Substantive*)

STATUTORY BASIS: 22 MRSA, §8704, sub-§4 and §8705, sub-§1 and 2, and PL 2019, c470.

PURPOSE: These rules will be amended include prescription drug manufacturers, wholesale drug distributors and pharmacy benefit managers who may be fined by the MHDO for failure to file prescription drug price data, failure to pay the annual assessment; and for intentional or knowing failure to protect the disclosure of confidential or privileged data.

SCHEDULE FOR ADOPTION: Prior to October 2020

AFFECTED PARTIES: All non-profit hospital and medical service organizations, ambulatory services and surgery facilities, health insurance carriers, health maintenance organizations and third-party administrators of health benefits plan’s administered for employers, carriers that provide only administrative services for plan sponsors, and recipients of data.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 120:** Release of Information to the Public (*Major Substantive*)

STATUTORY BASIS: 22 M.R.S.A., §8704, sub-§4, §8708, §8714, §8715, §8716, and §8717

PURPOSE*:* This rule may be amended toupdate the data elements allowable for release to authorized data recipients.

SCHEDULE FOR ADOPTION: Prior to October 2020

AFFECTED PARTIES:All parties who request, access, and utilize data from the MHDO and all parties who submit data to the MHDO.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 241:** Uniform Reporting System for Hospital Inpatient Data Sets and Hospital Outpatient Data Sets(*Routine Technical*)

STATUTORY BASIS: 22 M.R.S.A., §8704, sub-§1 and 4 and **§**8708

PURPOSE: These rules will be amended to align with the International Classification of Disease (ICD-9) to the ICD-10 edition Coding Manual. Adding elements that are in the current national standards will enhance the quality of the MHDO data for those using the data for analysis purposes.

SCHEDULE FOR ADOPTION: Spring 2020

AFFECTED PARTIES: All Maine hospitals that submit health-related data to the MHDO CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 243:** Uniform Reporting System for Health Care Claims Data Sets (*Routine Technical*)

STATUTORY BASIS: 22 M.R.S.A., §8704, sub-§1 and 4, and§8708

PURPOSE: These rules will be amended to add data fields for the Plan Begin Date and Plan End Date, which will be used as an internal check for calculating member months. Also, field length for Type of Bill is increased to capture the billing frequency, the fields Date of Service-From and Date of Service-Thru are remapped to the ASC X12N 837, and the specifications of several quantity and currency fields will be clarified.

SCHEDULE FOR ADOPTION: Spring 2020

AFFECTED PARTIES: All Maine licensed health insurance carriers, health maintenance organizations, and carriers that provide only administrative services for plan sponsors, and third-party administrators of health benefits plans administered for employers or a plan sponsor that pay claims for Maine residents.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 270:** Uniform Reporting Systemfor Health Care Quality Data Sets (*Major Substantive*)

STATUTORY BASIS: 22 M.R.S.A., §8704, sub-§4 and §8708-A

PURPOSE: These rules may be amended to add and/or eliminate health care quality measures collected by the MHDO to streamline and conform to national standards.

SCHEDULE FOR ADOPTION: Prior to October 2020

AFFECTED PARTIES: All health care practitioners.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 300:** Uniform Reporting System for Hospital Financial Data (*Routine Technical*)

STATUTORY BASIS: 22 M.R.S.A. §8704, sub-§4 and §8709

PURPOSE: These rules will be amended to change the format of filing hospital financial data to the MHDO and to include additional financial and organizational information.

SCHEDULE FOR ADOPTION: Spring 2020

AFFECTED PARTIES**:** All Maine hospitals and their parent entities

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 570:** Uniform Reporting System for Prescription Drug Price Data Sets *(Routine Technical/Major Substantive)*

STATUTORY BASIS: 22 M.R.S. Sections 8703 (1), 8704(1), 8705-A and 8705A(3), 8731, 8732, 8733, 8734, 8737, and PL 2019, c470.

PURPOSE: These rules will be amended to require drug manufacturers, wholesale drug distributors and pharmacy benefit managers to report cost and pricing of drugs information to the MHDO in order to provide greater transparency to the public.

SCHEDULE FOR ADOPTION: Spring 2020

AFFECTED PARTIES: All drug manufacturers, wholesale drug distributors and pharmacy benefit managers.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.

**CHAPTER 630**: Uniform System for Reporting Baseline Information and Restructuring Occurrences Relevant to the Delivery and Financing of Health Care in Maine (*Routine Technical*)

STATUTORY BASIS: 22 M.R.S.A., §8704, sub-§4 and §8710

PURPOSE: These rules may be repealed due to changes made to Chapter 300.

SCHEDULE FOR ADOPTION: Prior to October 2020

AFFECTED PARTIES: All Maine hospitals and their parent entities.

CONSENSUS-BASED RULE DEVELOPMENT: Not applicable.