MHDO 2013-EARLY 2014 KEY ACCOMPLISHMENTS AND CHALLENGES

KEY ACCOMPLISHMENTS

CORE WORK

- Drafted PHI Bill (1740); worked with Stakeholders and HHS committee to reach agreement on language in bill
- LD 1740 passed
- Participated in the meetings of the Legislative Commission to Study Transparency, Costs and Accountability of Health Care System Financing
- Secured access to Medicare data on a quarterly basis
- Successfully implemented rule changes to Chapter 10, 270, 241 and 243
- Established a Payer User Group with representation from over 50 claims data submitters
- Established the Super Data User Group with representation from the following:
  - State of Vermont
  - University of New Hampshire
  - Dartmouth
  - SAS
  - University of Southern Maine
  - Maine Medical Center
  - Bassett Healthcare Network
  - University of New England
  - Maine Health
  - Maine Health Management Coalition
  - Maine Department of Health and Human Services
Established a Consumer User Group to assist the Agency with the transparency grant deliverables; engaged a facilitator to lead these meetings. (Group meets bi monthly)

Established formal communication plan with payers and data users when issues are identified with data submissions and or data releases

Organized several meetings with external groups regarding our Provider Index work and how to best leverage work and or lessons learned in this area. Specifically we met with HIN, Maine Health Management Coalition and Licensing

Participated in National Association of Health Data Organization and APCD Council Conference

Now releasing NPI when we release practitioner identifiable releases

The encrypted member ID values have been replaced with numbers. The old values were up to 279 characters in length, while the new numeric values are under 20 characters in length

Release files are now being delivered to end users through a secure download. This is more efficient and more secure than the previous method of sending physical discs through the mail

Working with Data User Group to establish a formal set of metrics by which we will measure data quality (transparency)

Establishing a formal internal Quality Control (QC) and External Quality Assurance (QA) process/policy for all streams of data beginning with Claims and hospital encounter data

TRANSFORMATION:

DATA SUBMISSION PORTAL ENHANCEMENTS/ONGOING SUPPORT

Developed a structure and list of claims data validations with input from PUG and DUG

Designed and developed the MHDO Claims Data Warehouse Portal

Completed four stages of internal and user beta testing of the MHDO Data Warehouse Portal

Opened user registration in the MHDO Data Warehouse Portal on August 30, 2013

Opened the MHDO Data Warehouse Portal for data submission on September 12, 2013

Developed and revised a User Manual and FAQs for users of the portal

Developed a Survey for Portal User to Provide Feedback

Used survey feedback to plan Portal Enhancements

Developed Payer Compliance and Validation Reports
MHDO Data Storage Migration
- Moved the majority of our data from the State’s servers to the NORC enclave (server).
- Established access rights and protocols for MHDO staff and NORC staff

Data Warehouse/APCD Public Release Planning
- Developed Process for Loading Data from the Portal into the Historical APCD Structure for Release
- Planning the Framework for developing Master Indexes (Payer, Provider, Patient)

Data Management and Governance/Policy Development
- Prioritized and drafting data management policies and procedures.
- Established access protocols
- Developing plan to update data dictionaries and data element resource documents which are all out of date.

CMS Grant
- Analyzed HealthCost Methodology and Compiled Documentation on Current methodology
- Developed Interim 2014 HealthCost website (incorporated feedback from Consumer Subcommittee)
- Added over 150 new outpatient procedures to site
- Made decision to exclude inpatient procedures from the interim site given concern with current bundling logic
- Included external review of interim site before releasing with MHA and Health Plan representatives
- Assessing the feasibility of purchasing a bundling software package for future state

Key Challenges:
- External Communication
- Balancing the time it takes to identify and make improvements to the data structure with the goal of timeliness (balancing being responsive with accuracy)
- Continuing to work in parallel space (current state and end state)
- Issues with inconsistency in resource documentation (data dictionaries and data elements document)
- Balancing Multiple Priorities