The Maine Health Data Organization (MHDO) is proposed as the lead agency for Maine’s Rate Review Cycle III grant to enhance their existing Data Center. The Maine Legislature established MHDO in 1996 as an independent executive agency to create and maintain a useful, objective, reliable and comprehensive health information database that is used to improve the health of Maine citizens. MHDO created the nation’s first All Payer Claims Database (APCD) and has been collecting medical, pharmacy and dental claims data from public and private insurers since 2003 and makes those data publicly available while protecting individual privacy. MHDO is able to obtain these data expeditiously since public and private insurers are required by state law to submit these data. MHDO currently provides data on quality of care and price comparisons through its publicly accessible HealthCost and MONAHRQ web pages. As described more fully in the proposal, Maine has a strong history of public/private collaboration in health care improvement initiatives. By communicating and working together MHDO and these groups are able to leverage each other’s work and avoid duplication of effort.

Building upon the existing functionality of the HealthCost and MONAHRQ websites, and taking advantage of a new data warehouse infrastructure under development, MHDO intends to use grant funding to further integrate its cost and quality data to provide more comprehensive and useful information to consumers and other key stakeholders online. Specifically, MHDO intends to:

1) Increase the number of “shopable” procedures available online from 30 to at least 200
2) Incorporate quality data from MONAHRQ with cost data
3) Link and integrate other information on health care quality (e.g., Chapter 270 quality data) to cost information
4) Evaluate the inclusion of Medicare and Medicaid data on the cost website
5) Re-evaluate, modify, and improve methodologies for determining average payments of procedures for the insured population
6) Re-evaluate methodologies for presentation of pricing for uninsured
7) Evaluate links and integration with other efforts in Maine involving health data (e.g., CMS SIM grant) and commercial plans’ cost calculators and price information
8) Evaluating linking to or incorporating prescription drugs pricing information
9) Incorporate more powerful tools for online analysis (e.g., allow users to select specific CPT codes, hospitals, and/or geographical areas)
10) Improve accessibility for mobile devices so that MHDO and other health organizations can more easily develop apps leveraging MHDO data
11) Improve user interface and usability of site
12) Provide appropriate tools and data as separate paths on the site for researchers, employers, providers, consumers and other stakeholders
13) Improve web IT infrastructure to make site more modular and flexible, supporting ease of change in the future (i.e., move to content management system)
14) Evaluate and potentially build infrastructure to support national claims and hospital encounter data sets (i.e., ASC-X12 837 PACDR and ASC-X12 837)
15) Users will be able to take advantage of these APIs to access data dynamically from a variety of analytic tools, reducing the need for data storage on their end

16) Improve communication and outreach to the public to raise awareness of MHDO as a resource for health cost and quality data
   a. Awareness campaign
   b. Develop a mechanism for website user feedback

17) Collaborate with other state and regional health data and analysis efforts

18) Work collaboratively with stakeholders to better respond to their needs for data and transparency

The State of Maine is requesting $2,621,098 to complete this ambitious agenda.