

**MINUTES**

BOARD OF DIRECTORS MEETING

151 CAPITOL STREET

AUGUSTA, MAINE

THURSDAY, december 7, 2017

The meeting of the Maine Health Data Organization (MHDO) Board of Directors began at

9:05 a.m. with the following Board members present: Neil Korsen, (Chair), Anne Head

(Vice-Chair), Joel Allumbaugh, Andy Ellis, Peter Gore, Lisa Harvey-McPherson, Colin McHugh, Sandy Parker, and David Regan. Anita Knopp was absent. Also in attendance were Karynlee Harrington, Acting Executive Director and Deanna White, Agency Assistant Attorney General.

**Chair Report**

Vote to approve Board minutes - A motion was made and seconded to accept the September

7, 2017 MHDO Board minutes as written. Motion carried.

2018 Board Meeting Schedule - Neil reminded the Board of the 2018 quarterly meeting schedule and Karynlee informed them that the June retreat will be held in the Finance Authority of Maine’s board room again this year.

Presentation from Joan Orr, Director-Northern New England Practice Transformation Network (NNEPTN); Senior Director Programs, Quality Counts - Neil Korsen introduced Joan Orr and explained that this was a follow-up presentation to the one given to the MHDO Board at their last meeting by the University of New Hampshire. Ms. Orr’s presentation focused on how the MHDO claims data will be used by Quality Counts and the Providers. Refer to handout. This initiative is currently funded by CMS and Ms. Orr, Karynlee and Larry Clifford, Executive Director of Maine Quality Counts, who was also present, agreed to further discuss a sustainability model for refreshing the claims data in the existing portal.

**Executive Director Report**

CompareMaine 5.0 - Karynlee reviewed with the board an internal working document that summarizes the planned updates for upcoming releases of CompareMaine. Karynlee summarized the issues regarding the challenges associated with updating the CG CAHPS measure on CompareMaine. She is working with the team to present a recommendation at the June retreat on how best to proceed with this specific issue as well as the broader issue of reporting on primary care services. Neil stated that some practices are moving away from CAP surveys and are moving toward shorter, more detailed surveys, and offered to put Karynlee in touch with people at MaineHealth and/or Maine Medical Center who are working with this issue.

Transition from MEG grouper to Prometheus - Karynlee stated that the MEG grouper, which is currently being used for ten surgical procedures on CompareMaine will cost approximately $300,000 per year going forward. She explained the benefits of moving to Prometheus, one being that it is open source and free.

**Board Votes and Direction:**

After Board discussion, a motion was made to modify the requirement that the facility have 10 or more claims for a specific procedure down to 5 claims in order to bring in more data to the site especially in more rural areas of the State; to add volume measure to the site; and to move from the MEG grouper to Prometheus. The motion was seconded and passed unanimously.

There was a motion and a second to authorize Karynlee to develop an RFP for a web designer. Motion passed unanimously. Any Board member interested in being on the selection committee was asked to contact Karynlee.

A motion was made authorizing Karynlee to move forward with the proposed language changes to the MHDO DUA for State entities and to work with Deanna to decide which of the two options to lead with based on state’s individual laws. The motion was seconded and unanimously passed.

Request to suspend the enforcement of Rule Chapter 630, *Uniform System for Reporting Baseline Information and Restructuring Occurrences for Maine Hospitals and Parent Entities* - Karynlee provided the Board with a proposal to suspend enforcement of Chapter 630. She recommended suspension of the rule’s reporting requirements until the Board can discuss this in more detail at their retreat. They would then vote to either repeal the rule, enforce the rule as is, or to modify the rule. A motion was made and seconded to accept the language in the proposal as written. Motion passed unanimously.

The Board discussed and agreed that an additional disclaimer that pops up before an individual can access cost data should be added to the CompareMaine web site to reinforce the message that the average cost data does not represent what one will pay.

Adding Quality Measures to the Site - Karynlee reminded the Board of the feedback she received from several legislative committees in the last session including: Appropriations, Health and Human Services, and Insurance and Financial Services, they want more quality data at the individual procedure level on CompareMaine. She provided the Board with an internal working document of proposed additions to CompareMaine (see handout). The Maine Quality Forum, with the support of the HAI Collaborating Partners Group, is considering recommending changes to Chapter 270 to collect infection rates at the total knee and hip level. Both knee and hip replacements are two of the top ten searched procedures on CompareMaine.

Status of MHDO APCD and Hospital Data Releases - Karynlee informed the Board that we are back on schedule with the claims data releases after the delays from Gobeille and the SAMSHA Rule. She also reported that inpatient data is now being released on a quarterly basis beginning with Q12018 data.

Status of S.P. 147-L.D. 445*, An Act to Encourage Maine Consumers to Comparison-shop for Certain Health Care Procedures and to Lower Health Care Costs* - This issue was not discussed due to time constraints.

Status of Federal Rule 42 CFR Part 2 - Karynlee is working with state partners to submit an IRB application to become a qualified entity to receive restricted SUD data. She hopes to have an update to report at the March meeting.

Data Quality Forum - Karynlee informed the Board that she has been having conversations with the National Association of Health Data Organizations around data quality and NAHDO has convened a group to look at defining high quality databases.

Common Data Layout (CDL) – Karynlee reminded the board that the original goal of developing and adopting the CDL was to address the concerns expressed in the opinion regarding Gobeille specific to administrative burden for a self-funded ERISA plan to report data under different requirements across the different APCD’s. The CDL is a significant element of the comments/strategy that was submitted to the DOL by the National Association of Health Data Organizations and States like Maine with APCD’s. There is no movement with the DOL on the comments submitted and since the comments were submitted there has been some noise nationally that State APCD’s are not as useful as they could be because there is no common data layout adopted by all States collecting claims data. For many reasons moving to a national standard may be a more sustainable model over the long term and ultimately create a higher quality data set. Karynlee would like to continue to advocate at the national level with her peers for moving in this direction. Board supported her efforts and agreed that she should continue these conversations.

**Maine Quality Forum (MQF)**

RFP released for External Validation of Maine Hospital Healthcare Associated Infection

Data - This issue was not discussed due to time constraints.

**Public Comment**

No public comment was provided.

The meeting adjourned at 11:00 a.m.