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DATE: January 24, 2023

TO: Members of the Joint Standing Committee on Health Coverage, Insurance and

Financial Services

CC: Colleen McCarthy Reid, Principal Analyst

Bethany Beausang, Senior Policy Advisor, Office of Governor Janet T. Mills

Joel Allumbaugh, Chair MHDO Board of Directors

Commissioner Head, Vice-Chair, MHDO Board of Directors

FROM: Karynlee Harrington, Executive Director, Maine Health Data Organization &

Maine Quality Forum

RE: Briefing Memo for Maine Health Data Organization and Maine Quality Forum



Maine Quality Forum

— MEASURING TO IMPROVE ——

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Part I-Maine Health Data Organization

1. General Overview

- The MHDO was created by the Legislature in 1995 as an independent executive agency (Title 22 Chapter 1683) that operates under the supervision of a multi-stakeholder Board of Directors. The Governor appoints the members of the board. Board composition includes representation from: Payers, Hospitals, Providers, Home Health Care, Chiropractic, Consumers, Employers and, Government.
- Legislative Committee of oversight is the Joint Standing Committee on Health Coverage, Insurance and Financial Services.
- MHDO's purpose is to create and maintain a useful, objective, reliable and comprehensive health information data warehouse that is used to improve the health of Maine citizens **and** to promote transparency of the cost and quality of healthcare in the State of Maine by procedure, payer, facility, and provider in collaboration with the Maine Quality Forum (MQF).
- The MHDO is a data center that is responsible for the collection, secure storage, management and authorized release of healthcare data and information per the requirements defined in thirteen agency rules; four of which are major substantive rules.
- > Data Sets submitted to MHDO include: claims data, hospital inpatient and outpatient encounter data, hospital quality data, pharmacy data and hospital financial and provider organizational data.
- MHDO maintains over 1 billion healthcare records and that number continues to grow every month new data is submitted.
- ➤ The MHDO receives its funding from an assessment on payers, hospitals, and non-hospital providers-not from the general fund, data access fees and grants. The assessment is approximately \$1.5M/year.
- > The annual budget is approximately \$2 Million.
- **Priorities** of the MHDO as established by the MHDO Board of Directors:
 - 1. Manage a high-quality, secure, comprehensive health information data warehouse
 - 2. Manage the appropriate release of healthcare data and information

- 3. Promote the transparency of healthcare cost and quality information
- 4. Support ongoing stakeholder engagement with our data submitters, data users and consumers
- 5. Support a culture of change based on our stakeholders' needs
- > Guiding Principles of the MHDO as established by the MHDO Board of Directors:
 - 1. Responsive and timely: Communicate data availability and manage data releases to published timeframes
 - 2. Accurate: Ensure consistency and conformity of all data submissions
 - 3. Accessible: Provide self-service applications where possible and remove barriers to access
 - 4. Streamlined: Build efficient processes for data collection and release; leverage national standards when available
 - 5. Secure: Protect the confidentiality of personal health data electronic threats change, and systems must adapt to meet these challenges
- ➤ MHDO's data vendor is Human Services Research Institute (HSRI), home office located in Cambridge, Mass., partnered with NORC at the University of Chicago. HSRI and NORC assist the MHDO with our operations including data storage, data collection, data release, CompareMaine, development of mandated and ad-hoc reporting.
- For over 10 years MHDO's data has been the source of health care data for the analysis of health care costs, utilization, and outcomes. Specifically, MHDO's data supports legislation including Transparency of Health Care Costs and Quality, Surprise Billing, Workers Comp, MaineCare Rate Setting, Opioid Analyses, Insulin Costs, Primary Care and Behavioral Health Care Spending in Maine, Ambulance Costs, Prescription Drug Costs, Right to Shop, Maine's Reinsurance Program, and the Office of Affordable HealthCare.

2. Examples of Use Cases

- ➤ Maine Quality Forum uses MHDO claims data to develop its annual primary care spending report required by statute; and its new requirement to report behavioral health care spending.
- ➤ Maine Cancer Foundation is using MHDO's claims and hospital data to develop Maine's first comprehensive Cancer Blueprint.
- ➤ Maine DHHS-CDC is using MHDO's claims data to analyze Alzheimer's Disease and Related Dementia (ADRD).
- ➤ Maine Office of Attorney General MHDO's claims data is being used for competitive analysis of merger and non-merger reviews by the Maine Attorney General pursuant to antitrust laws.
- ➤ Maine Department of Health and Human Services MHDO's claims data is one of the data sources the department is using in its analysis of its rate methodologies for health care services.
- Partnership for Children's Oral Health uses MHDO dental data to support reporting on

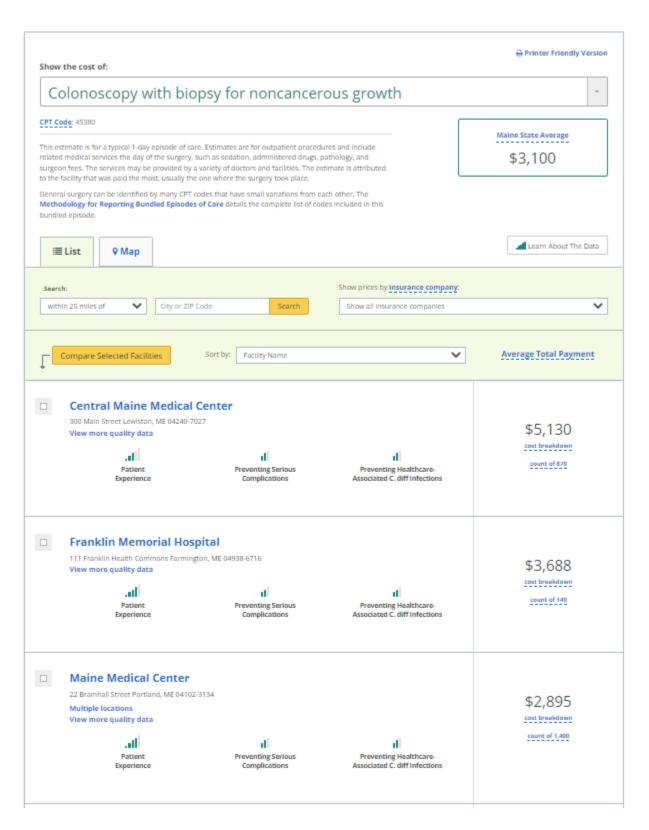
patterns in utilization of preventive and restorative dental services and look at variations in utilization and cost across payer/insurer type, age group, location/geography, provider type, and setting of care.

- Maine Hospital Association MHDO's hospital inpatient data has been used to conduct volume and service use analyses across Maine hospitals; and MHDO's annual hospital financial reports are accessed.
- ➤ Healthcare Purchaser Alliance of Maine MHDO claims data was used to create Primary Care Practice Reports which provide practices with utilization and quality information specific to their patients.
- MaineHealth MHDO's claims, and hospital data has been used for years to inform MaineHealth system's efforts to (1) improve the quality and safety of the services provided, (2) identify opportunities to make the services provided less costly, and (3) support member organizations and strategic affiliates to assume the responsibilities and risks of an Accountable Care Organizations participating in the Medicare Shared Savings Program and similar arrangements with commercial payers.
- ➤ InterMed is using MHDO claims data to identify opportunities to improve access, quality, and cost of care.
- ➤ MaineGeneral Health MHDO claims, and hospital data is being used to effect improvements in the quality and safety of their services and identify cost-saving opportunities.
- > St. Mary's Health System and St. Joseph Hospital MHDO claims data has been used to determine if pricing is in line with the market and where there is variation.
- ➤ Anthem BCBS ME MHDO claims data has been used to explore the impacts of regional variations in care; assist with the development of payment innovation models; and understand the dynamics of the market because of the Affordable Care Act.
- ➤ VA Medical Center MHDO claims data was used to determine the healthcare services of V.A. enrollees outside of the V.A. system.
- Muskie School of Public Service MHDO claims data is being used to support several initiatives including a multi payer study on the trends in telehealth use by children in Maine.

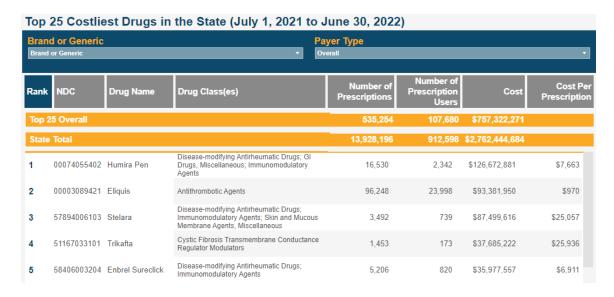
Link to MHDO public posting of data requests can be found here: https://mhdo.maine.gov/datarequest.aspx

3. CompareMaine

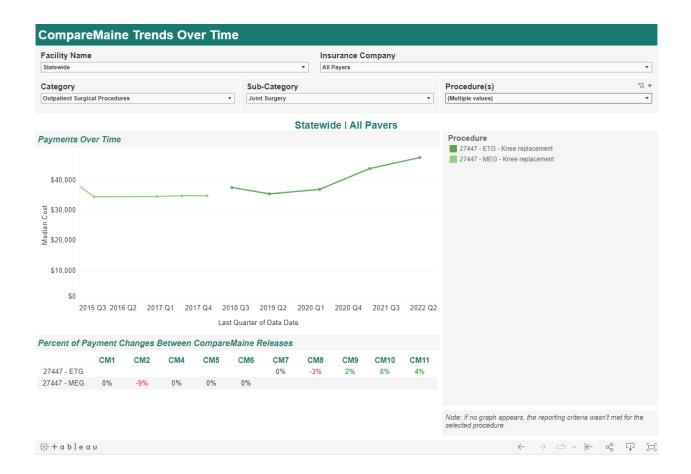
- ➤ In 2014 MHDO partnered with the Maine Quality Forum (as required by statue) to work on enhancing efforts to promote the transparency of healthcare cost and quality data. With the support of two federal grants and several external partners a new website, www.CompareMaine.org was launched in the fall of 2015.
- MHDO updates the cost and quality data annually. In December 2022, MHDO released version 110.0 which reflects the most current cost data, for commercial plans only (defined as payments to facilities) for the time-period April 1, 2021-March 2022, and most current quality data.
- ➤ CompareMaine reports the average payment for commercial plans, for 300 health care procedures from 325 facilities (organized into 168 facility groups) by the top 5 commercial payers in the State.
- The total payments on CompareMaine represent over 60% of the total commercial payments in the MHDO claims data.
- The procedures on CompareMaine are those that are generally either high cost, high utilization and or there is variation in the costs and at least 3-5 facilities provide the service.
- ➤ The total number of healthcare facilities represents over 50% of all healthcare facilities in the MHDO claims data. (Healthcare facilities defined as hospitals, surgical centers, diagnostic imaging centers, health centers, laboratories, and clinics.)
- CompareMaine reports on the following quality measures: patient survey ratings, preventing serious complications, preventing healthcare associated infections, preventing falls with injury, preventing pressure ulcers and unplanned hospital-wide readmissions



- > Since CompareMaine went live (fall 2015) there have been over 900,000 Pageviews.
- ➤ Top 10 Procedures Searched on CompareMaine:
 - 1. Vaginal Delivery
 - 2. Colonoscopy with Biopsy for Noncancerous Growth
 - 3. Knee Replacement
 - 4. Colonoscopy Without Biopsy for Encounter for Preventative Health Services
 - 5. Hip Replacement
 - 6. C-section (Cesarean Delivery)
 - 7. MRI Scan of Brain
 - 8. MRI Scan of Leg Joint
 - 9. Gallbladder Removal
 - 10. MRI Scan of Lower Spinal Canal
- ➤ MHDO's Top 25 Drug Reports also reported on CompareMaine (most costly, most utilized, and highest year over year increases) as required by law can be found on CompareMaine here: https://www.comparemaine.org/?page=rx-costs



The trend dashboard also available on CompareMaine reports how the average total costs reported on CompareMaine have changed over time.
https://www.comparemaine.org/?page=trends



In 2020, Catalyst for Payment Reform and the Source on Healthcare Price and Competition, at the University of California Hastings College of Law, released a report highlighting the efforts of states across the country in making health care price information available to consumers. States that scored high are those with robust price transparency laws and useful resources for consumers, such as mandatory websites that display price information at no charge and in a consumer-friendly format. Maine and New Hampshire are the only two states that received a grade of an A. Copy of full Report can be found here: Report Card on State Price Transparency Laws May 2020.

4. Mandated Reports

Report	Statute	Due Date	Submit to
Prescription Drug Pricing Transparency, 3 rd annual report	PL 2020, Chapter 470	November 2022	Joint Standing Committee on Health Coverage, Insurance and Financial Services (HCIFS)
Top 25 most frequently prescribed drugs in the State, costliest and highest year-over-year increases, 5 th report Interactive Report is included in CM 11.0 Release	PL 2017, Chapter 406	December 2022 Interactive Report is included in CM 11.0 Release	HCIFS
New: International Referenced Rate Pricing for Prescription Drugs	PL 2021, Chapter 606	January 1	HCIFS, Office of Affordable Health Care and the Maine Prescription Drug Affordability Board
New: Health Care Expenditures in Maine – Baseline Report	PL 2021, Chapter 459	December 2022	Governor's Office

5. Links to Data on MHDO's Website

- ➤ Health Care Expenditures and Health Care Quality in Maine: Baseline Report https://mhdo.maine.gov/tableau/baselineHealthcareExpQuality.cshtml
- Prescription Drug Costs and Utilization in Maine at Retail and Mail Order Pharmacies https://mhdo.maine.gov/tableau/prescriptionReports.cshtml
- CompareMaine Health Care Costs and Quality Data https://www.comparemaine.org/?page=home&from=logo
- MHDO's Standardized Hospital Financial Reports https://mhdo.maine.gov/hospital financials.htm
- MHDO's Data Availability Claims and Hospital Data-Interactive Tableau Reports https://mhdo.maine.gov/tableau/data.cshtml
- Hospital Quality Data https://mhdo.maine.gov/quality_data_reports.htm

6. State and National Activities

- Recognizing the growing demand for health data analytics in Maine, the University of Southern Maine established the Health Data Analytics Research Cluster (HDARC). MHDO and USM signed a memorandum of understanding for the purpose of combining resources to advance health data training opportunities within the University. The MHDO shares data and technical knowledge and the HDARC provides graduate student training in health data, and address research questions of importance to MHDO.
- MHDO is a member of the National Association of Health Data Organizations (NAHDO); and its executive director has been a member of its board of directors; and has sereved as the chair of the board for the last three years. The MHDO works closely with this association on national issues that impact data definitions, standards, collection, security, integration and release.
- ➤ MHDO is advocating nationally for adoption of a common data layout (CDL) for the submission of claims data to all APCD's. The goal of States adopting a national standard is to streamline the data submission process for the payors submitting data, which should also improve the quality of data submissions.



Part II- Maine Quality Forum

1.General Overview

- The Maine Quality Forum (MQF) was established in 2003 per 24-A Chapter 87 Section 6951 to monitor and improve the quality of health care in the State.
- > The MQF is part of the general fund budget with an annual budget of approximately \$1.2M.
- Legislative Committee of oversight is the Joint Standing Committee on Health Coverage, Insurance and Financial Services.
- ➤ Title 24-A Chapter 87, Section 6951 describes the duties of MQF which include: coordinating the collection of healthcare quality data; promoting the transparency of comparative healthcare quality and performance data on a publicly accessible website; reporting annually on the amount of primary care spending, and spending on behavioral health care in the state of Maine; conducting educational campaigns to help consumers make informed decisions and engage in healthy lifestyles; and several healthcare infection prevention activities including an annual report on the rates of healthcare associated infections in Maine hospitals.
- ➤ MQF contracts with the University of Southern Maine, Muskie School of Public Service, for analytic support on several key initiatives and annual reports, including, defining and measuring healthcare quality for public reporting (CompareMaine); measuring spending on Primary Care and Behavioral Health Care services and MQF's reporting on the rate of healthcare associated infections in the state of Maine.

2. Key Initiatives

- Developing an enhanced strategy for promoting the transparency of health care quality data on CompareMaine and what is posted on MHDO's website for Hospital Quality Data in collaboration with the Maine Health Data Organization. Current quality data measures available on CompareMaine: Preventing Serious complications, Preventing Healthcare- Associated Infections, Preventing Falls with Injury, Preventing Pressure Ulcers, Unplanned Hospital-Wide Readmissions
- Annual reporting on Healthcare Associated Infections in Maine; Primary Care Spending; and Behavioral Health Care Spending in Maine.
- Collaborating with MHDO on defining the reporting requirements in 90-590 Chapter 270,

Uniform Reporting System for Health Care Quality Data Sets.

- Supporting the maintenance and development of new content for Maine's Infection Prevention Forum (MIPF), https://maineinfectionpreventionforum.org/ in collaboration with the Department of Health and Human Services, ME CDC, and the University of Southern Maine. The MIPF website is a repository for the latest infection prevention courses and resources designed to support the educational needs of health care and direct care workers.
 - Content areas of the website include: general infection control and prevention practices; common infectious diseases; Isolation/transmission precautions, surveillance and data collection; performance improvement, and antibiotic stewardship. In addition to the stand-alone modules there is a comprehensive set of resources that have been organized by topic.
- MQF recently developed and posted on the Maine Infection Prevention website a new training on urinary tract infections for Long Term Care Facilities.
- ➤ MQF is providing technical assistance for Project Firstline to the Maine Center for Disease Control and Prevention's Healthcare Epidemiology Program. Project Firstline is a Federal CDC's program with a mission to provide critical infection control education to frontline healthcare workers, with a focus on infection control and COVID-19.
- > Supporting the Office of Affordable Health Care as required in statute. MQF drafted the health care quality in Maine section of the January 2023 Health Care Expenditure and Health Care Quality in Maine: Baseline Report.

3. Mandated Reports

Report	Statute	Due Date	Submit to
Primary Care Spending, 4 th annual report	PL 2019, Chapter 244	January 15	HCIFS & the Commissioner of DHHS
New: Behavioral Health Care Spending	PL 2021, Chapter 603	January 15	HCIFS & the Commissioner of DHHS
Healthcare Associated Infections in Maine	PL 2007, Chapter 594	January 30	

4. Links to Previous Reports

- ➤ 2018 Annual Report on Healthcare Associated Infections in Maine. https://mhdo.maine.gov/ mqfdocs/2018%20HAI%20Annual%20Report%20FINAL.pdf
- 2021 Annual Report: Primary Care Spending in Maine https://mhdo.maine.gov/_mqfdocs/MQF%20Primary%20Care%20Spending%20Report_Feb%20 2021.pdf