

Annual List of Rule-Making Activity
Rules Adopted January 1, 2021 to December 31, 2021
Prepared by the Secretary of State, pursuant to 5 MRS §8053-A sub-§5

Agency name: **Maine Health Data Organization**
Umbrella-Unit: **90-590**
Statutory authority: 22 MRS §§ 8704 (4) and 8708
Chapter number/title: **Ch. 241**, Uniform Reporting System for Hospital Inpatient Data Sets and Hospital Outpatient Data Sets
Filing number: **2021-229**
Effective date: 11/15/2021
Type of rule: Routine Technical
Emergency rule: No

Principal reason or purpose for rule:

These changes update links to several source code resources, clarify the description of valid codes for race and ethnicity data elements, and modify descriptions for several other data elements to more accurately reflect the requirement.

Basis statement:

The Maine Health Data Organization is authorized by statute to collect health care data. Chapter 241 governs the provisions for filing hospital inpatient data sets and hospital outpatient data service sets. The provisions include identification of the organizations required to report; requirements for the content, form, medium, and time for filing the data; standards for the data reported; and compliance provisions.

Fiscal impact of rule:

There is no fiscal impact on state municipalities, counties or businesses.

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Agency name: **Maine Health Data Organization**
Umbrella-Unit: **90-590**
Statutory authority: 22 MRS §§ 8703(1), 8704(4), 8708(6-A), 8712(2)
Chapter number/title: **Ch. 243**, Uniform Reporting System for Health Care Claims
Data Sets
Filing number: **2021-230**
Effective date: 11/15/2021
Type of rule: Routine Technical
Emergency rule: No

Principal reason or purpose for rule:

The rule update adds new fields for payment arrangement type, removes obsolete data elements, and clarifies the requirements for others.

Basis statement:

The Maine Health Data Organization is authorized by statute to collect health care data. This chapter governs the provisions for filing health care claims data sets from all third-party payers, third-party administrators, Medicare health plan sponsors, and pharmacy benefits managers. The provisions include identification of the organizations required to report; establishment of requirements for the content, format, method, and time frame for filing health care claims data; establishment of standards for the date reported; and compliance provisions.

Fiscal impact of rule:

There is no fiscal impact on state municipalities, counties or businesses.

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Agency name: **Maine Health Data Organization**
Umbrella-Unit: **90-590**
Statutory authority: 22 MRS §§ 8703(1), 8704(1)&(4)
Chapter number/title: **Ch. 247** (*New*), Uniform Reporting System for Non-Claims Based Primary Care Payments
Filing number: **2021-242**
Effective date: 12/12/2021
Type of rule: Routine Technical
Emergency rule: No

Principal reason or purpose for rule:

It is anticipated that this new rule will improve the accuracy of the State's annual reporting of primary care spending in the state of Maine. The substance of the proposed rule is based on recommendations for uniformity in defining primary care and non-claims-based payments developed by Milbank Memorial Fund, in their report titled Measuring Non-Claims-Based Primary Care Spending. The rationale for adopting the Milbank methodology is to streamline the administrative burden for reporting entities and align with a strategy that may become the national standard adopted by the National Association of Health Data Organizations (NAHDO). Access to report is here: https://www.milbank.org/wp-content/uploads/2021/04/Measuring_Non-Claims_7-1.pdf .

Basis statement:

MHDO is required by statute to create and maintain a useful, objective, reliable and comprehensive health information database that is used to improve the health of Maine citizens and to issue reports and or support the development of reports as mandated. The reason for proposing this new rule is so that MHDO's data for Primary Care payments is accurate and comprehensive in that it reflects both payments made under the traditional fee for service model {governed under ch. 243} and alternative payment models, which are non-claims based payments {governed under this proposed rule}. PL 2019 ch. 244 requires the Maine Quality Forum to develop an annual report to submit to the legislature on primary care spending in the state of Maine, using data from the Maine Health Data Organization. Currently, MHDO's data set does not reflect the total investment that payers (both private and public) are making in primary care and therefore understates the level of spending in the state of Maine. This rule provides the structure for the submission of data for non-claims based primary care payments. This will allow for accurate reporting and better inform future policy decisions specific to investments in primary care.

Fiscal impact of rule:

This rule will not have a fiscal impact on municipalities or counties, or any adverse economic impact on small businesses.

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Agency name: **Maine Health Data Organization**
Umbrella-Unit: **90-590**
Statutory authority: 22 MRS §§ 8703(1), 8704(1), 8705-A and 8705-A(3), 8731, 8732, 8733, 8734, 8735, 8737
Chapter number/title: **Ch. 570**, Uniform Reporting System for Prescription Drug Price Data Sets
Filing number: **2021-231**
Effective date: 12/10/2021
Type of rule: Major Substantive
Emergency rule: No

Principal reason or purpose for rule:

The revisions clarify the requirements for the reporting entities defined in rule ch. 570, which will ensure more uniform data submission, and streamline the data collection and validation process.

Basis statement:

The Maine Health Data Organization (MHDO) is authorized by statute to collect health care data, including prescription drug price data. The purpose of this chapter is to explain the provisions for filing prescription drug price sets from prescription drug manufacturers, wholesale drug distributors and pharmacy benefits managers.

The revisions will clarify the requirements for reporting entities, which will ensure more uniform data submission, and streamline the data collection and validation process.

Fiscal impact of rule:

There is no fiscal impact on state municipalities, counties, or businesses.

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Agency name: **Maine Health Data Organization**
Umbrella-Unit: **90-590**
Statutory authority: PL 2021 ch. 423; 22 MRS §§ 1406-A, 2706 sub-§2-A, 8715-A
Chapter number/title: **Ch. 730** (*New*), Interagency Reporting of Cancer Registry and Vital Statistics Data (*jointly with the Department of Health and Human Services*)
Filing number: **2021-246**
Effective date: 12/14/2021
Type of rule: Routine Technical
Emergency rule: No

Principal reason or purpose for rule:
(See Basis Statement)

Basis statement:

The Maine Health Data Organization is authorized by statute to collect health care data. PL 2021 ch. 423, *An Act to Improve Health Care Data Analysis*, requires the Maine Health Data Organization and the Department of Health and Human Services to adopt a joint rule to require the reporting to the MHDO of data from the cancer-incidence registry established pursuant to 22 MRS §1404 and data related to the registration of vital statistics pursuant to 22 MRS §2701. This new rule meets the requirement as defined above.

The integration of the cancer registry and vital statistics data information into the MHDO data sets will enhance the data analysis in the State of Maine, specific to cancer research.

The provisions of this new rule include: identification of the agencies involved and the reporting requirements; establishment of requirements for the content, format, method, and reporting periods for the data; data integration; and confidentiality.

Fiscal impact of rule:

There is no fiscal impact on state municipalities, counties or small businesses.