

## §6951. Maine Quality Forum

The Maine Quality Forum, referred to in this subchapter as "the forum," is established within Dirigo Health. The forum is governed by the board with advice from the Maine Quality Forum Advisory Council pursuant to section 6952. The forum must be funded, at least in part, through the savings offset payments made pursuant to former section 6913 and the access payment pursuant to section 6917. Except as provided in section 6907, subsection 2, information obtained by the forum is a public record as provided by Title 1, chapter 13, subchapter 1. The forum shall perform the following duties. [PL 2009, c. 359, §5 (AMD); PL 2009, c. 359, §8 (AFF).]

**1. Research dissemination.** The forum shall collect and disseminate research regarding health care quality, evidence-based medicine and patient safety to promote best practices. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**2. Quality and performance measures.** The forum shall adopt a set of measures to evaluate and compare health care quality and provider performance. The measures must be adopted with guidance from the advisory council pursuant to section 6952. The quality measures adopted by the forum must be the basis for the rules for the collection of quality data adopted by the Maine Health Data Organization pursuant to Title 22, section 8708-A. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**3. Data coordination.** The forum shall coordinate the collection of health care quality data in the State. The forum shall work with the Maine Health Data Organization and other entities that collect health care data to minimize duplication and to minimize the burden on providers of data. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**4. Reporting.** The forum shall work collaboratively with the Maine Health Data Organization, health care providers, health insurance carriers and others to report in useable formats comparative health care quality information to consumers, purchasers, providers, insurers and policy makers. The forum shall produce annual quality reports in conjunction with the Maine Health Data Organization pursuant to Title 22, section 8712. No later than September 1, 2010, the forum shall make provider-specific information regarding quality of services available on its publicly accessible website. [PL 2009, c. 350, Pt. A, §2 (AMD).]

**5. Consumer education.** The forum shall conduct education campaigns to help health care consumers make informed decisions and engage in healthy lifestyles. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**6. Technology assessment.** The forum shall conduct technology assessment reviews to guide the use and distribution of new technologies in this State. The forum shall make recommendations to the certificate of need program under Title 22, chapter 103-A. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**7. Electronic data.** The forum shall encourage the adoption of electronic technology and assist health care practitioners to implement electronic systems for medical records and submission of claims. The assistance may include, but is not limited to, practitioner education, identification or establishment of low-interest financing options for hardware and software and system implementation support. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**8. State health plan.** [PL 2011, c. 90, Pt. J, §23 (RP).]

**9. Annual report.** The forum shall make an annual report to the public. The forum shall provide the report to the joint standing committees of the Legislature having jurisdiction over appropriations and financial affairs, health and human services matters and insurance and financial services matters. [PL 2003, c. 469, Pt. A, §8 (NEW).]

**10. Health care provider-specific data.** The forum shall submit to the Legislature, by January 30th each year beginning in 2009, a health care provider-specific performance report. The report must be based on health care quality data, including health care-associated infection quality data, that is submitted by providers to the Maine Health Data Organization pursuant to Title 22, section 8708-A. The forum and the Maine Center for Disease Control and Prevention shall make the report available to the citizens of the State through a variety of means, including, but not limited to, the forum's publicly accessible website and the distribution of written reports and publications.

[PL 2007, c. 594, §1 (NEW).]

**11. Infection prevention activities.** The forum and the Maine Center for Disease Control and Prevention shall, by January 30th of each year beginning in 2009, report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on statewide collaborative efforts with health care infection control professionals in the State to control or prevent health care-associated infections.

[PL 2007, c. 594, §2 (NEW).]

**12. Primary care reporting.** Beginning January 15, 2020 and annually thereafter, the forum shall submit to the Department of Health and Human Services and the joint standing committee of the Legislature having jurisdiction over health coverage and health insurance matters a report on primary care spending using claims data from the Maine Health Data Organization and information on the methods used to reimburse primary care providers requested annually from payors, as defined in Title 22, section 8702, subsection 8. The report must include:

A. Of their respective total medical expenditures, the percentage paid for primary care by commercial insurers, the MaineCare program, Medicare, the organization that administers health insurance for state employees and the Maine Education Association benefits trust and the average percentage of total medical expenditures paid for primary care across all payors; and [PL 2019, c. 244, §2 (NEW).]

B. The methods used by commercial insurers, the MaineCare program, Medicare, the organization that administers health insurance for state employees and the Maine Education Association benefits trust to pay for primary care. [PL 2019, c. 244, §2 (NEW).]

[PL 2019, c. 244, §2 (NEW).]

**13. Behavioral health care reporting.** Beginning January 15, 2023 and annually thereafter, the forum shall submit to the Department of Health and Human Services and the joint standing committee of the Legislature having jurisdiction over health coverage and health insurance matters a report on behavioral health care spending using claims data from the Maine Health Data Organization and information on the methods used to reimburse behavioral health care providers requested annually from payors. As used in this subsection, "payor" has the same meaning as in Title 22, section 8702, subsection 8. The report must include:

A. Of their respective total medical expenditures, the percentage paid for behavioral health care by commercial insurers, the MaineCare program, Medicare, the organization that administers health insurance for state employees and the Maine Education Association benefits trust and the average percentage of total medical expenditures paid for behavioral health care across all payors; [PL 2021, c. 603, Pt. A, §2 (NEW).]

B. The total behavioral health care-related nonclaims-based payments and associated member months; [PL 2021, c. 603, Pt. A, §2 (NEW).]

C. The total payments associated with substance use disorder services that are redacted from the payor's claims data submissions to the Maine Health Data Organization as required under 42 Code of Federal Regulations, Part 2, the methods used to redact the substance use disorder claims, the specific code lists that are used for procedure codes, revenue codes and diagnosis codes, provider

types and any other detail on the claim that is required to select the substance use disorder redacted claim; and [PL 2021, c. 603, Pt. A, §2 (NEW).]

D. The methods used by commercial insurers, the MaineCare program, Medicare, the organization that administers health insurance for state employees and the Maine Education Association benefits trust to pay for behavioral health care. [PL 2021, c. 603, Pt. A, §2 (NEW).]

Within 60 days of a request from the Maine Health Data Organization, a payor shall provide the supplemental datasets specific to payments for behavioral health care services necessary to provide the information required in paragraphs B and C. In its request to a payor, the organization shall specify the time period for which the data is requested and define the datasets requested to ensure uniformity in the data submitted by payors.

[PL 2021, c. 603, Pt. A, §2 (NEW).]

#### SECTION HISTORY

PL 2003, c. 469, §A8 (NEW). PL 2007, c. 594, §§1, 2 (AMD). PL 2007, c. 629, Pt. L, §5 (AMD). PL 2009, c. 350, Pt. A, §2 (AMD). PL 2009, c. 359, §5 (AMD). PL 2009, c. 359, §8 (AFF). PL 2011, c. 90, Pt. J, §23 (AMD). PL 2019, c. 244, §2 (AMD). PL 2021, c. 603, Pt. A, §2 (AMD).

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