

MAINE STATE LEGISLATURE

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STATE OF MAINE
HOUSE OF REPRESENTATIVES
114TH LEGISLATURE
FIRST REGULAR SESSION

COMMITTEE AMENDMENT "A" to H.P. 32, L.D. 32, Bill, "An Act Relating to the Collection of Specified Health Care Information"

Amend the bill in section 6 by striking out all of subsection 2-A and inserting in its place the following:

'2-A. Additional information on ambulatory surgery. Pursuant to rules adopted by the commission for form, medium, content and time for filing, each provider of health care shall file with the commission a completed data set, comparable to data filed by health care facilities under subsection 2, paragraph C, for each ambulatory surgery listed pursuant to subsection 11, occurring after January 1, 1990. This subsection shall not be construed to require duplication of information also required to be filed under subsection 2.'

Further amend the bill by striking out all of section 8 and inserting in its place the following:

'Sec. 8. 22 MRSA §394, sub-§7-A is enacted to read:

7-A. More than one location. When a provider of health care operates in more than one location, the commission may require that information be reported separately for each location.'

Further amend the bill in section 10 by striking out all of subsection 11 and inserting in its place the following:

'11. Data lists. Beginning on October 1, 1989, and at least annually thereafter, the commission shall by rule prepare a list of major ambulatory services for which data is to be collected pursuant to subsection 2, paragraph C, and a list of ambulatory surgeries for which data is to be collected pursuant to subsection 2-A. The commission shall distribute the lists to

1 those providers of health care that are required to file
2 information under subsection 2 or 2-A.'

3
4 Further amend the bill by striking out all of section 11 and
5 inserting in its place the following:

7 'Sec. 11. 22 MRSA §395-A is enacted to read:

9 §395-A. Health care information

11 1. Development of health care information systems. In
12 addition to the commission's authority to obtain information to
13 carry out the specific provisions of this subchapter, the
14 commission may require providers of health care to furnish
15 information with respect to the nature and quantity of services
16 provided to the extent necessary to develop proposals for the
17 modification, refinement or expansion of the systems of
18 information disclosure established under this subchapter. The
19 commission's authority under this subsection includes the design
20 and implementation of pilot information reporting systems
21 affecting selected categories of providers of health care or
22 representative samples of providers.

23
24 2. Demonstration project. The commission may establish a
25 demonstration project requiring the submission of data from all
26 providers with respect to services listed in subsection 3 in
27 nonhospital settings. The demonstration project shall be
28 designed to test the feasibility of using standard claim forms
29 for the submission of data, how the cost of data collection is
30 balanced with the value of the data, whether patient-specific or
31 aggregate data can best address the purposes for which the data
32 is sought, and whether providers should be compensated for
33 providing the data.

34 3. Covered services. The services for which data may be
35 required under subsection 2 are:

- 36
37 A. Computed tomography services;
38
39 B. Magnetic resonance imaging services;
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41 C. Cardiac angiography; and
42
43 D. Cardiac catheterization services.'

44
45 Further amend the bill by striking out all of sections 12
46 and 13 and inserting in their place the following:

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48 'Sec. 12. Appropriation. The following funds are appropriated
49 from the General Fund to carry out the purposes of this Act.

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COMMITTEE AMENDMENT "A" to H.P. 32, L.D. 32

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1989-90 1990-91

MAINE HEALTH CARE FINANCE COMMISSION

Health Care Finance Commission

All Other	\$6,000	\$12,600
Capital Expenditures	4,800	

Provides funds to cover the nonhealth providers' share of the cost of collecting certain outpatient data. Funds will be used to edit data, purchase a computer and office furniture, and cover general operating expenses.

MAINE HEALTH CARE FINANCE COMMISSION TOTAL

\$10,800 \$12,600

Sec. 13. Allocation. The following funds are allocated from Other Special Revenue funds to carry out the purposes of this Act.

1989-90 1990-91

MAINE HEALTH CARE FINANCE COMMISSION

Health Care Finance Commission

Positions	(1)	(1)
Personal Services	\$27,054	\$37,852

Allocates funds for a Comprehensive Health Planner II to collect and analyze outpatient data. This allocation will cover the hospitals' share of the data collection.'

Further amend the bill by striking out all of the fiscal note and inserting in its place the following:

FISCAL NOTE

Enactment of this bill will result in an increase of \$27,054 in fiscal year 1989-90 and \$37,852 in fiscal year 1990-91 to the Maine Health Care Finance Commission Fund. The Maine Medicaid

COMMITTEE AMENDMENT "A" to H.P. 32, L.D. 32

1 Program will be assessed approximately \$3,247 in fiscal year
2 1989-90 and \$4,542 in fiscal year 1990-91 to fund its share of
3 the hospital assessment. The Department of Human Services has
4 indicated that it can absorb this cost within current
5 appropriations.'

7

STATEMENT OF FACT

9

11 This amendment revises the bill to provide that the Maine
12 Health Care Finance Commission develop by rule a list of major
13 ambulatory services for which data will be collected from
14 hospitals and a list of ambulatory surgery procedures from which
15 data will be collected from all providers. In addition, the
16 commission may conduct a demonstration project in which data may
17 be collected regarding specific ambulatory services in
18 nonhospital settings, that is CT, MRI, cardiac angiography and
19 cardiac catheterization. This amendment also corrects the
appropriation and allocation sections and the fiscal note.

Reported by the Committee on Human Resources
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