

2	L.D. 1760
2	DATE: 3-22-06 (Filing No. S-516)
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6	HEALTH AND HUMAN SERVICES
8	Reported by: Minority
10	Reproduced and distributed under the direction of the Secretary of the Senate.
12	STATE OF MAINE
14	SENATE 122ND LEGISLATURE
16	SECOND REGULAR SESSION
18	n
20	COMMITTEE AMENDMENT "B" to S.P. 677, L.D. 1760, Bill, "An Act To Amend the Maine Health Data Organization Laws Regarding Dental Services"
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24	Amend the bill by striking out the title and substituting the following:
26	'An Act To Amend the Maine Health Data Organization and Maine Health Data Processing Center Laws'
28	Further amend the bill by striking out everything after the
30	enacting clause and before the summary and inserting in its place the following:
32	'Sec. 1. 10 MRSA §684, sub-§5, as enacted by PL 2001, c. 456,
34	\$1, is amended to read:
36	5. Cooperation with agencies and organizations. Cooperate with and avail itself of the services of government agencies and
38	the University of Maine System and cooperate, assist and otherwise encourage organizations, local or regional, private or
40	public, in the various communities of the State in the collection and processing of health care data; and
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44	Sec. 2. 10 MRSA §684, sub-§6, as corrected by RR 2001, c. 2, Pt. B, §22 and affected by §58, is amended to read:
46	<b>6. Bylaws.</b> Adopt bylaws that are consistent with this chapter for the governance of the affairs of the center, have the
48	general powers accorded corporations under Title 13-C, section 302 and do all other things necessary or convenient to carry out
50	the lawful purposes of the center, and

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## **COMMITTEE AMENDMENT**

COMMITTEE AMENDMENT " $\beta$ " to S.P. 677, L.D. 1760

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#### Sec. 3. 10 MRSA §684, sub-§7 is enacted to read:

7. Process data on behalf of entities outside State.
Enter, to offset its operating costs, into contracts under
subsection 4 with governmental or private entities outside the
State to collect and process health care data for those
entities. Data collected and processed by the center under such
a contract is subject to the terms of the contract and the
provisions of this chapter. Notwithstanding section 682, data
collected under this subsection remain the sole and exclusive
property of the entity contracting with the center.

Sec. 4. 10 MRSA §689, sub-§1, as enacted by PL 2001, c. 456, §1, is amended to read:

Net earnings of center. The annual net earnings of the 1. center must be distributed to the Maine Health Data Organization 18 and the Maine Health Information Center in proportion to the average annual funding provided by each entity for the 20 operational costs of the center. The net earnings of the center may not inure to the benefit of any officer, director or 22 employee, except that the center is authorized and empowered to pay reasonable compensation for services rendered and otherwise 24 hold, manage and dispose of its property in furtherance of the 26 purposes of the center.

28 Sec. 5. 22 MRSA §8704, sub-§7, as amended by PL 2005, c. 253, §5, is further amended to read:

30 Annual report. The board shall prepare and submit an 7. annual report on the operation of the organization and the Maine 32 Health Data Processing Center as authorized in Title 10, section 34 681, including any activity contracted for by the organization and contracted services provided by the center, with resulting 36 net earnings, to the Governor and the joint standing committee of the Legislature having jurisdiction over health and human services matters no later than February 1st of each year. 38 The report must include an annual accounting of all revenue received 40 and expenditures incurred in the previous year and all revenue and expenditures planned for the next year. The report must include a list of persons or entities that requested data from 42 the organization in the preceding year with a brief summary of 44 the stated purpose of the request.

46 Sec. 6. 22 MRSA §8705-A, sub-§3, ¶B, as enacted by PL 2003, c. 659, §2, is amended to read:

B. A person or entity that receives data or information 50 under the terms and conditions of section 8707 and

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# COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "B" to S.P. 677, L.D. 1760

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intentionally or knowingly uses, sells or transfers the data in violation of the board's rules for commercial advantage, pecuniary gain, personal gain or malicious harm commits a civil violation for which a fine not to exceed \$250,000 \$500,000 may be adjudged.'

#### SUMMARY

10 This amendment, which is the minority report of the Joint Standing Committee on Health and Human Services, removes the provision of the bill that subjects dental services insurance policies to the permanent funding assessment under the Maine Health Data Organization laws. The amendment allows the Maine Health Data Processing Center to receive and process claims from 16 entities outside of the State, specifies how the net earnings of the center must be distributed and requires the Board of 18 Directors of the Maine Health Data Organization to report those net earnings each year.

This amendment also increases the fine from \$250,000 to 22 \$500,000 for a person who receives and uses data of the Maine Health Data Organization for commercial advantage, pecuniary or 24 personal gain or malicious harm.

#### FISCAL NOTE REQUIRED (See attached)

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COMMITTEE AMENDMENT



Approved: 03/01/06

### **122nd MAINE LEGISLATURE**

LD 1760

2554(03)

#### An Act To Amend the Maine Health Data Organization Laws Regarding Dental Services

Fiscal Note for Bill as Amended by Committee Amendment "B" Committee: Health and Human Services Fiscal Note Required: Yes

**Fiscal Note** 

Potential current biennium revenue increase - Other Special Revenue Funds Potential future biennium cost increase - Other Special Revenue Funds

#### **Fiscal Detail and Notes**

The Maine Health Data Organization and the Maine Health Data Processing Center may receive additional revenue and may incur additional costs as a result of the provisions of this bill. The exact amounts and the resulting net impact cannot be determined at this time. The bill as amended does not subject dental services insurance polices to the MHDO assessment. This would not affect total MHDO revenue collected because other payers would make up the difference.