

MAINE STATE LEGISLATURE

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Date: 4/2/8

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
123RD LEGISLATURE
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT "A" to H.P. 1251, L.D. 1797, Bill, "An Act To Fund Maine's HealthInfoNet Program"

Amend the bill by striking out the title and substituting the following:

'Resolve, To Advance Maine's HealthInfoNet Program'

Amend the bill by striking out everything after the title and before the summary and inserting the following:

'Sec. 1. Stakeholder process. Resolved: That the Maine Quality Forum and HealthInfoNet shall work together to convene a broadly representative stakeholder group to study and make recommendations for establishing and financing a quality improvement and technology fund that would initially contribute to HealthInfoNet's establishment and sustainability and make it possible for health care providers with limited financial resources to obtain electronic medical record systems.

1. The work of the stakeholder group must include: identification of broad-based, stable, ongoing revenue sources; development of a technology investment account to help ensure the establishment of HealthInfoNet and provide financial assistance to health care providers with limited resources with the costs of electronic medical records and e-prescribing; estimating return on investment from shared electronic clinical information; establishing eligibility criteria for funding assistance; developing a methodology for measuring the quality and cost impact of HealthInfoNet and shared electronic clinical information; and providing recommendations, including legislation, to the joint standing committee of the Legislature having jurisdiction over health and human services matters by December 1, 2008.

2. The stakeholder group must be broadly representative of persons and entities in the health care field, and representatives must be invited, at a minimum, from the following: providers and payors of health care services, associations of providers and payors, providers of long-term care and assisted living services, rural health clinics and associations representing those providers, Maine pharmacies, the pharmaceutical

COMMITTEE AMENDMENT

COMMITTEE AMENDMENT "A" to H.P. 1251, L.D. 1797

1 manufacturing industry, public health advocates and entities, state agencies that provide
2 and pay for health care services, the Governor's Office of Health Policy and Finance, the
3 Muskie School of Public Service, the MaineCare Advisory Committee, the Governor's
4 MaineCare Providers' Advisory Group, the American Association of Retired Persons, the
5 Finance Authority of Maine, the Maine Health and Higher Educational Facilities
6 Authority, the Maine Technology Institute, the Maine State Chamber of Commerce and
7 HealthInfoNet.

8 The stakeholder group must meet in May, June, July, September, October and
9 November of 2008. All meetings must be public meetings. Legislators must be provided
10 notice of the meeting dates and encouraged to attend as observers.

11 The expenses of convening the stakeholder group must be borne by HealthInfoNet.

12 The joint standing committee of the Legislature having jurisdiction over health and
13 human services matters is authorized to submit legislation to the 124th Legislature
14 pertaining to establishing and financing a quality improvement and technology fund.'

15 **SUMMARY**

16 This amendment replaces the bill with a resolve. The resolve establishes a broadly
17 representative stakeholder group to study and make recommendations regarding
18 establishing and financing a quality improvement and technology fund.

19 **FISCAL NOTE REQUIRED**
20 **(See attached)**



123rd MAINE LEGISLATURE

LD 1797

LR 2549(02)

An Act To Fund Maine's HealthInfoNet Program

Fiscal Note for Bill as Amended by Committee Amendment "A"

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - Other Funds

Fiscal Detail and Notes

Any additional costs to the Maine Quality Forum in the Dirigo Health Agency can be absorbed by the agency utilizing existing budgeted resources.