

Summary Notes

Maine Quality Forum Advisory Council

November 12, 2004

MQF Advisory Council members present: Jonathan Beal, Rick Bruns, Rebecca Colwell Jeffrey Holmstrom, Frank Johnson, Nancy Kelleher, James McGregor, Chip Morrison, Dan Roet, Steve Shannon, and Janice Wnek. Dennis Shubert of the Maine Quality Forum, Karynlee Harrington of Dirigo Health Agency, and Maureen Booth of the Muskie School of Public Service were also in attendance.

In the absence of Robert McArtor, Rebecca Colwell chaired the meeting. Minutes of the October 8, 2004 meeting were accepted as submitted.

Dr. Shubert informed the Council that two of its members ran successful campaigns during the recent election. Becky Colwell won a seat on the Gardiner City Council and Lisa Miller was elected to the Maine State Legislature from District 52. It has been determined that neither position represents a conflict of interest with their roles on the MQF Advisory Council.

Dirigo Health Reform Update

Adam Thompson from the Governor's Office of Health Policy and Finance updated the Advisory Council on activities underway to advance health reform in Maine. The Commission to Study Maine's Hospitals will be conducting a public hearing on its draft report in December prior to the report's submission to the Legislature in January 2005. Three town hall meetings will be held around the state in March under the *Tough Choices Campaign* to engage citizens in discussing their health care priorities, needs and desired outcomes. Preparatory to these meetings, a data book is being prepared on Maine's health care system and status by region.

Dirigo Choice Update

Karynlee Harrington reported that Anthem has given out over 4,000 quotes to small businesses for Dirigo Choice. Currently, there are approximately 1,000 covered lives with a goal of enrolling 10,000 by January 2005. A 4-week marketing campaign was initiated on November 1 to strengthen awareness among both employers and employees regarding the product.

Paid Claims Database

Ms. Suanne Singer, Vice President of Operations for Maine Health Information Center and the person in charge of the Maine Data Processing Center, provided an overview of the purpose and content of the Paid Claims Database. Legislatively authorized in 2001, the Paid Claims Database is a cooperative effort of the Maine Health Data Organization and the Maine Health Information Center. Data collection began in January 2003 with a projected release date of January 2005.

The database encompasses all private insurance claims, across all settings, for medical care, pharmacy, and dental claims and associated eligibility files. Medicare has agreed to submit its claims data but the details remain to be resolved. Medicaid has not yet agreed to submit its claims data.

The data submission process is web based. An encrypted patient identifier allows data to be analyzed for a single person across multiple providers and settings of care. Ms. Singer described the rigorous edit and validation processes that are in place to assure data integrity. She also pointed out elements that are not included in the data base: the uninsured, worker's compensation, treatment to non-residents of Maine, premiums, denied claims, authorizing entity of claim, test results, prescribing physicians, designation of in or out of network providers, provider offices within a group practice, co-payments or administrative fees.

The database allows for 10 diagnostic codes per claim, as well as E-codes and the usual procedure and diagnosis identifiers. The database offers enormous analytic capacity to better understand access issues, by age and gender, cost shifting from employers to members, and events within an episode of care. The database adheres to strict requirements of confidentiality prohibiting the release of data for individual patients and will be extremely instrumental in providing analyses for use by the MQF.

Rule 850

Dr. Shubert described proposed changes to Rule 850 that permit a carrier to provide financial incentives encouraging members to use designated providers insofar as these providers meet specified quality standards. The MQF was asked to advise the subcommittee of the Commission to Study Maine's Hospitals who are working on these proposals to identify standards that could serve as indicators of an institution's higher quality.

Dr. Shubert proposed using the National Quality Forum's set of 30 safe practices as the basis for distinguishing a higher quality institution. While there was general agreement that these were credible and useful measures, members expressed reservations about whether they alone could adequately distinguish the quality of an institution. Further work would also be required to determine the metrics that should be used to ascertain compliance with each of the standards and how information could be collected without duplicating existing efforts. Without determining how the NQF measures would be operationalized and by whom, the Council voted to support the use of the NQF standards to identify a higher quality institution based on the listed safe practices.

Quality Counts

Dr. Shubert announced that the Maine Quality Forum was providing a home for Quality Counts during its transitional period, as well as limited administrative support.

Technology Assessment Committee Update

Jonathan Beal, chair of the Technology Assessment Committee, reviewed his committee's draft report, conducted in response to a legislative request to the Maine Quality Forum to study:

- nurse staffing levels in Maine hospitals;
- question of mandated nurse/patient staffing ratios;
- rules of the Department of Health and Human Services with respect to nurse staffing.

The consensus of the Advisory Council was that the report was acceptable except for two issues. The first issue pertained to the characterization of input from nurses regarding nurse-staffing plans. Members felt that language should clearly indicate that solicitation of nurse opinion was not conducted by project staff but was obtained through an informal telephone interviews conducted by the Maine State Nurses Association with 28 nurses selected non-randomly. It was also suggested that this section of the report replace the word “disturbing” with “of concern.”

The second issue requiring further review was the summarization of the Provider Group input on the 15 nurse sensitive indicators. Dr. Shubert prepared a summary of the Provider Group’s comments on the proposed indicators. To assure that the Provider Group’s position was accurately reflected in the report, it was agreed that the summary would be emailed to Provider Group members for review of accuracy.

Both the revised language on the nurse survey and the Provider Group position on nurse sensitive conditions will be reviewed at the December MQF Advisory Council meeting in time for submission to the Legislature by the January 2005 deadline.

Chair Term and Election

Dr. Shubert brought to the attention of the MQF Advisory Council that Robert McArtor’s term as chair officially terminates in January 2005 by statute. The enabling statute is mute on the issue of successive terms in office. The Advisory Council will need to decide the issue of allowing successive terms. Time will be set aside at the December meeting to discuss Bob’s interest in continuing as chair.

Public Comments

In response to a question regarding the Provider Group, Dr, Shubert indicated that communications with the Group on the nurse sensitive conditions would be conducted via email.

Next Meeting

The next meeting of the MQF Advisory Council is scheduled for December 10, 2004.

