

1 16 DEPARTMENT OF PUBLIC SAFETY

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3 163 BUREAU OF EMERGENCY MEDICAL SERVICES (MAINE EMS)

4 CHAPTER 22: EMERGENCY MEDICAL SERVICES DATA

5 §1. Definitions

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- 7 1. “National data elements” means the specific EMS data elements defined by the  
8 national emergency medical services information system (NEMSIS).  
9 2. “National emergency medical services information system (NEMSIS)” means the  
10 national EMS electronic database, as developed, and published by USDOT,  
11 NHTSA.  
12 3. “Maine EMS patient care reporting System” means the Maine EMS electronic  
13 database, that meets the requirements of NEMSIS, provided by Maine EMS to all  
14 EMS agencies and EMS clinicians to record EMS incidents.  
15 4. “Receiving Facility” means the hospital or any other facility the patient was  
16 transported to.  
17 5. “Base Hospital Contacted” means the facility that is the sending facility on an  
18 interfacility transport.  
19 6. “Health Info Net (HIN)” means the independent, nonprofit information services  
20 organization that manages the statewide health information exchange (HIE) in  
21 Maine.  
22 7. “Health Information Exchange (HIE)” is the statewide HIE designed to link an  
23 individual’s clinical information from unaffiliated healthcare sites to create a single  
24 electronic health record, allowing authorized providers across the state to better  
25 support and coordinate patient care.

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27 §2. Data Ownership

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- 29 1. Data collected in the patient care reporting system is the property of the EMS agency or  
30 other entity submitting the data.  
31 a. Maine EMS shall have unrestricted access to the data within the patient care  
32 system.  
33 b. EMS agencies are responsible for the accuracy of the information entered into  
34 patient care and retain access to the data for the purpose of patient care.  
35 Moreover, EMS agencies may request data access logs for their data, which  
36 Maine EMS will provide within 14 days.

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38 §3. Patient Care Report Required

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- 40 1. For each request for service, or for each patient when more than one patient is involved  
41 in a call, a service will require their ems clinician who participated in the response to  
42 complete and submit an electronic Maine EMS patient care report, as specified by  
43 Maine EMS, within twenty-four hours from the incident completion date and time.  
44 2. For each request for service, or for each patient when more than one patient is involved

45 in a call, an EMS clinician who participated in the response must submit a completed  
46 electronic Maine EMS patient care report, as specified by Maine EMS, within twenty-  
47 four hours from the incident completion date and time.  
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49 **§4. Patient Care Report Requirements and Reporting Timeframe**  
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- 51 1. Patient care reporting of EMS incidents by an EMS clinician or unit shall be made by  
52 providing the information in the Maine EMS Data Dictionary, as applicable,  
53 electronically, using software developed or purchased through contract, and distributed  
54 by Maine EMS.
- 55 2. When a patient is transported to a hospital/facility, the EMS clinician shall complete a  
56 patient care report and submit it to the hospital/facility in accordance with the Maine  
57 EMS Protocols.
- 58 i. To ensure optimum continuity of care between EMS clinicians and hospital  
59 staff, the EMS clinician shall submit the patient care report to the  
60 hospital/facility as follows:
- 61 a. electronically, within 24 hours.
- 62 i. In the event a full patient care report cannot be left at  
63 the receiving facility prior to the departure of the  
64 ambulance crew, a Maine EMS approved hand-written  
65 short form must be left in all circumstances
- 66 ii. The provider shall submit the patient care report to the receiving  
67 hospital/facility.
- 68 3. Maine EMS shall provide standard, non-mobile access to the standard offering of the  
69 electronic patient care reporting system at no cost to an EMS Agency.  
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72 **§5. Emergency Medical Services Monitoring of Health Outcomes**  
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- 74 1. Maine Emergency Medical Services electronically transmits EMS patient care reports  
75 to Maine Health Info Net (HIN) for storage in the State of Maine Health Information  
76 Exchange (HIE).
- 77 a. The following data elements will be requested on all patients receiving emergency  
78 medical treatment as defined in Chapter 2 of these rules:
- 79 1. Emergency Department Disposition  
80 2. Hospital Disposition  
81 3. External Report ID/Number Type  
82 4. External Report ID/Number  
83 5. Other Report Registry Type  
84 6. Emergency Department Chief Complaint  
85 7. First ED Systolic Blood Pressure  
86 8. Emergency Department Recorded Cause of Injury  
87 9. Emergency Department Procedures  
88 10. Emergency Department Diagnosis  
89 11. Date/Time of Hospital Admission  
90 12. Hospital Procedures

- 91 13. Hospital Diagnosis
- 92 14. Total ICU Length of Stay
- 93 15. Total Ventilator Days
- 94 16. Date/Time of Hospital Discharge
- 95 17. Outcome at Hospital Discharge (e.g., Cerebral Performance Category
- 96 Score or Scale at Hospital Discharge)
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- 98 b. records identifying a patient, in any format, that include HIV or AIDS status or test
- 99 results, or that relate to referral, treatment or services for a behavioral or mental
- 100 health disorder or substance use disorder are excluded from this requested data.
- 101 2. Entities providing data to the state-designated statewide health information exchange
- 102 as described in Title 22, section 1711-C, may notify the board of their decision to do
- 103 so by submitting an authorization letter to each provider (i.e., hospital, physician)
- 104 participating in the Health Information Exchange (HIE) with language to the effect of:
- 105 “[Provider Entity Name] is a participant in the state-designated statewide Health
- 106 Information Exchange as described in Title 22 MRSA §1711-C. By signing below,
- 107 [Provider Entity Name] hereby authorizes the Board to receive [Provider Entity
- 108 Name’s] healthcare information or records in accordance with Title 32 MRSA §96
- 109 (2)(A).”
- 110 a. Providers may choose to not authorize the Board to retrieve their data from the
- 111 HIE, those entities, must then provide the data directly to the Board
- 112 3. Entities providing data to the state-designated statewide health information exchange
- 113 as described in Title 22, section 1711-C may revoke that authorization by submitting a
- 114 letter to the state-designated statewide health information exchange as described in
- 115 Title 22, section 1711-C, revoking the Entity’s previous authorization.
- 116 4. Maine EMS Posts all data requests received on the Maine EMS Website:
- 117 a. The information shared will include the following:
- 118 i. Date of request
- 119 ii. Date request was fulfilled
- 120 iii. The data elements that were requested
- 121 iv. The data elements that were provided
- 122 v. The requestor
- 123 vi. The purpose of the request
- 124 vii. A copy of any agreement regarding the data release, if applicable
- 125 viii. Board of EMS authorization information, if applicable
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127 **§6. Quality Assurance & Improvement**

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- 129 1. Quality initiatives are adopted in the following process:
- 130 a. The Maine EMS Quality Assurance & Improvement Committee promulgates
- 131 statewide quality initiatives for review and adoption by the Maine EMS Board,
- 132 2. Notification to providers regarding quality initiatives:
- 133 a. Maine EMS shall provide a public list of Maine EMS Board approved quality
- 134 initiatives on the website.
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AUTHORITY:	32 M.R.S. §§88, sub-§2, §91-B, sub-§1, §96
EFFECTIVE DATE:	To Be Determined
ADOPTED:	To Be Determined

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