

*Medicare* Parts A and B. Under the Buy-In Programs for Medicare, the State, through the Medical Assistance Program, pays federal premiums for people certified by the local department of social services as unable to cover hospital insurance (Part A) or medical insurance (Part B).

#### TECHNICAL OPERATIONS

Alan R. Shugart, *Deputy Director*  
(410) 767-5408

Under Technical Operations are the MMIS—II Project, and two divisions: Claims Processing; and Medicaid Information Systems (MMIS).

#### DIVISION OF CLAIMS PROCESSING

Joseph L. Fine, *Chief*  
(410) 767-5795

The Division of Claims Processing started as the Division of Invoice Processing and received its present name in 1989. The Division processes all claims for payment made by providers of health care services under the Medical Assistance, Pharmacy Assistance and Prenatal Assistance Programs. Processing includes mail sorting, microfilming, entry of claims into the Batch and Invoice Control File of the Medicaid Management Information System, and processing of payments in excess of \$1.5 billion annually for 12 million claims received. The Division maintains records of payments to, as well as collection from, the more than 25,000 health care providers enrolled in the Medical Assistance Program. The Division also serves as a centralized purchasing and inventory unit for the Administration.

#### DIVISION OF MEDICAID INFORMATION SYSTEMS

Vacancy, *Chief*  
(410) 767-5408

Established in 1982, the Division of Medicaid Information Systems serves as the data processing unit for Medical Care Programs. The Division performs systems analysis and programming, and maintains a teleprocessing network. It maintains and operates the Medicaid Management Information System (MMIS), an automated claims processing and information retrieval system mandated by the federal government. The Division also provides data processing for the Geriatric Evaluation Services; Pharmacy Assistance Program; and Statewide Evaluation and Planning Services.

#### MEDICAID MANAGEMENT INFORMATION SYSTEM (MMIS—II) PROJECT

John J. O'Brien, *Chief*  
(410) 767-6937

Formed in 1993, the Medicaid Management Information System (MMIS—II) Project is working to replace the Medicaid Management Information System (MMIS). The Project will secure a

certified MMIS from another state, enhance it to meet Maryland needs, install it on the State computer, and integrate it with new information systems technologies.

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### MARYLAND HEALTH CARE ACCESS & COST COMMISSION

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Donald E. Wilson, M.D., *Chair*, 1998  
John M. Colmers, *Executive Director*

4201 Patterson Ave.  
Baltimore, MD 21215—2299 (410) 764-3460

In 1993, the Maryland Health Care Access and Cost Commission was created as an independent agency within the Department of Health and Mental Hygiene (Chapter 9, Acts of 1993).

The Commission develops strategies by which the costs of health care may be limited and access to health care services extended to all Marylanders. The Commission formulates a uniform set of benefits for the comprehensive standard health benefit plan; devises a payment system for health care services; and fosters development of practice parameters. The Commission also facilitates public disclosure of medical claims data for the development of public policy; maintains and analyzes a medical care data base on health care provided by health care practitioners; and ensures the use of that data base as a primary means to compile data and annually report on trends, variances, and comparisons regarding fees for service, cost of care, and malpractice. Additionally, the Commission encourages the development of clinical resource management systems that permit cost comparisons between various treatment settings and the availability of information to consumers, providers, and purchasers of health care; sets standards for the operation and licensing of medical care electronic claims clearinghouses; and reduces the costs of submitting and administering claims for health care practitioners and payors.

With Senate advice and consent, the Governor appoints the Commission's seven members to four-year terms. The Governor also names the chair (Code Health—General Article, secs. 19-1501 through 19-1516).

#### ADVISORY COMMITTEE ON PRACTICE PARAMETERS

J. Ramsay Farah, M.D., *Chair*

The Advisory Committee on Practice Parameters was established in 1993 (Chapter 9, Acts of 1993). The Committee is to study the development of practice parameters for medical specialties and advise the Maryland Health Care Access and Cost Commission on the adoption and use of practice parameters. These parameters are intended to define appropriate clinical indications and methods of