B.   For the minimum number of trauma physicians required to be on–call, as specified by the Maryland Institute for Emergency Medical Services Systems in its criteria for level III trauma centers; AND

3.   A.   A LEVEL II TRAUMA CENTER IS ELIGIBLE FOR A MAXIMUM OF ~~26,280~~ 24,500 HOURS OF TRAUMA ON–CALL PER YEAR; AND

B.   A LEVEL III TRAUMA CENTER IS ELIGIBLE FOR A MAXIMUM OF 35,040 HOURS OF TRAUMA ON–CALL PER YEAR;

(ii)   The cost of undercompensated care incurred by a trauma physician in providing trauma care to enrollees of the Maryland Medical Assistance Program who are trauma patients on the State trauma registry shall be reimbursed at a rate of up to 100% of the Medicare payment for the service, minus any amount paid by the Maryland Medical Assistance Program; ~~AND~~

(iii)   The cost of uncompensated care incurred by a trauma physician in providing trauma care to trauma patients on the State trauma registry shall be reimbursed at a rate of up to 100% of the Medicare payment for the service, minus any recoveries made by the trauma physician for the care~~; and~~; and

(iv)   The total reimbursement to emergency physicians from the Fund may not exceed [$250,000] $275,000 annually.

~~(iv)   The total reimbursement to emergency physicians from the Fund may not exceed [$250,000] $275,000 annually.~~

(5)   In order to receive reimbursement, a trauma physician in the case of costs of uncompensated care under subsection (b)(2)(i) of this section, or a trauma center in the case of on–call costs under subsection (b)(2)(iii) of this section, shall apply to the Fund on a form and in a manner approved by the Commission and the Health Services Cost Review Commission.

(6)   (i)   The Commission and the Health Services Cost Review Commission shall adopt regulations that specify the information that trauma physicians and trauma centers must submit to receive money from the Fund.

(ii)   The information required shall include:

1.   The name and federal tax identification number of the trauma physician rendering the service;

2.   The date of the service;

3.   ˙Appropriate codes describing the service;

4.   Any amount recovered for the service rendered;

5.   The name of the trauma patient;

6.   The patient's trauma registry number; and