- (II) ANY AMOUNT FOR A DIAGNOSTIC TEST FOR WHICH PAYMENT MAY NOT BE MADE PURSUANT TO PARAGRAPH (2) OF THIS SUBSECTION.
- (H) THE COMMISSION, IN CONSULTATION WITH THE INSURANCE COMMISSIONER, PAYORS, HEALTH CARE PRACTITIONERS, AND HOSPITALS, MAY ADOPT BY REGULATION STANDARDS FOR THE ELECTRONIC SUBMISSION OF DATA AND SUBMISSION AND TRANSFER OF THE UNIFORM CLAIMS FORMS ESTABLISHED UNDER ARTICLE 48A, § 490P OF THE CODE.

19-1508.

- (A) THE COMMISSION, IN CONSULTATION WITH INTERESTED PARTIES INCLUDING PAYORS, THE MEDICAL AND CHIRURGICAL FACULTY OF MARYLAND, THE MARYLAND PHARMACISTS ASSOCIATION PHYSICIANS, PHARMACISTS, THE MARYLAND HOSPITAL ASSOCIATION, AND ANY OTHER HEALTH CARE PRACTITIONERS AS APPROPRIATE, SHALL DEVELOP A SYSTEM TO FOSTER THE DEVELOPMENT OF PRACTICE PROTOCOLS AND TO PROVIDE INFORMATION TO PHYSICIANS CONCERNING THEIR CHARGES AND UTILIZATION OF SERVICES IN COMPARISON TO THEIR PEERS.
- (B) THE COMMISSION MAY LIMIT THE DEVELOPMENT AND DISTRIBUTION OF COMPARATIVE INFORMATION TO PHYSICIANS REQUIRED UNDER SUBSECTION (A) OF THIS SECTION TO:
- (1) PHYSICIANS WHOSE CHARGES FOR OR UTILIZATION OF HEALTH CARE SERVICES ARE CONSIDERED OUTLIERS; OR
- (2) PHYSICIANS WHO RENDER—CERTAIN HEALTH—CARE—SERVICES SELECTED BY THE COMMISSION:
- (A) (1) IN ORDER TO MORE EFFICIENTLY ESTABLISH A MEDICAL CARE DATA BASE UNDER § 19–1507 OF THIS SUBTITLE, THE COMMISSION SHALL ESTABLISH STANDARDS FOR THE OPERATION OF ONE OR MORE MEDICAL CARE ELECTRONIC CLAIMS CLEARINGHOUSES IN MARYLAND AND MAY LICENSE THOSE CLEARINGHOUSES MEETING THOSE STANDARDS.
- (2) <u>IN ADOPTING REGULATIONS UNDER THIS SUBSECTION, THE</u> COMMISSION SHALL CONSIDER APPROPRIATE NATIONAL STANDARDS.
- (3) THE COMMISSION MAY LIMIT THE NUMBER OF LICENSED CLAIMS CLEARINGHOUSES TO ASSURE MAXIMUM EFFICIENCY AND COST EFFECTIVENESS.
- (4) THE COMMISSION, BY REGULATION, MAY CHARGE A REASONABLE LICENSING FEE TO OPERATE A LICENSED CLAIMS CLEARINGHOUSE.
- (5) ON OR BEFORE JULY 1, 1995, HEALTH CARE PRACTITIONERS IN MARYLAND, AS DESIGNATED BY THE COMMISSION, SHALL SUBMIT, AND PAYORS OF HEALTH CARE SERVICES IN MARYLAND AS DESIGNATED BY THE COMMISSION SHALL RECEIVE CLAIMS FOR PAYMENT AND ANY OTHER INFORMATION REASONABLY RELATED TO THE MEDICAL CARE DATA BASE ELECTRONICALLY IN A STANDARD FORMAT AS REQUIRED BY THE COMMISSION WHETHER BY MEANS OF A CLAIMS CLEARINGHOUSE OR OTHER METHOD APPROVED BY THE COMMISSION.