

1. Other than the payment amount specified under paragraph (1) of this subsection;
 2. Other than any applicable deductible and coinsurance for a diagnostic test for which payment is made pursuant to paragraph (1)(i) of this section; and
 3. More than the fee as provided under paragraph (1)(ii)2 of this subsection; or
- (ii) Any amount for a diagnostic test for which payment may not be made pursuant to paragraph (2) of this subsection.

(4) On or before January 1, 1995, the Commission shall adopt regulations to enforce the provisions of this subsection.

(i) 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) (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) In adopting regulations under this subsection, the 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] 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.

(6) The Commission shall establish reasonable deadlines for the phasing in of electronic transmittal of claims from those health care practitioners designated under paragraph (5) of this subsection.

(7) [On or before July 1, 1995, as] AS designated by the Commission, payors of health care services in Maryland and Medicaid and Medicare shall transmit explanations of benefits 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.