- 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.

SECTION 2. 4. AND BE IT FURTHER ENACTED, That Section(s) 19–1001 through 19–1007, inclusive, and the subtitle "Subtitle 10. Major Medical Equipment" and Section(s) 19–1101 through 19–1109, inclusive, and the subtitle "Subtitle 11. Freestanding Birthing Centers" of Article – Health – General of the Annotated Code of Maryland be repealed.

SECTION 3. 5. AND BE IT FURTHER ENACTED, That the Secretary of Health and Mental Hygiene shall adopt regulations to implement the licensing provisions of Title 19, Subtitle 3B of the Health – General Article on or before October 1, 1995 May 1, 1996, and that: (1) for ambulatory surgical facilities, freestanding endoscopy facilities, and kidney dialysis centers, the licensing regulations shall be based on, but not limited to, existing regulatory standards for Medicare reimbursement of facilities certified by the Health Care Financing Administration of the United States Department of Health and Human Services; and (2) for freestanding birthing centers and freestanding facilities utilizing major medical equipment, the licensing regulations shall be based on existing licensure regulations.

SECTION 4. AND BE-IT-FURTHER ENACTED, That, except as otherwise provided in Section 3 of this Act, the Secretary of Health and Mental Hygiene shall adopt regulations to implement the provisions of Title-19, Subtitle 3B of the Health—General Article on or before May 1, 1996.

SECTION 6. AND BE IT FURTHER ENACTED, That the Health Resources Planning Commission shall examine various options to help develop incentives for health care industries, providers, and ambulatory surgical facilities to locate in the urban and rural areas of the State that have the highest and most urgent need for health care services.

SECTION 5. 7. AND BE IT FURTHER ENACTED, That the Health Resources Planning Commission shall adopt regulations on the development of subacute care units to undertake a comprehensive approach to examine the wide range of issues relating to subacute care, while at the same time affording the opportunity for some acute care general hospitals that do not currently own or operate units separately licensed as extended care facilities or comprehensive care facilities to obtain certificates of need in order to establish new comprehensive care facility units to provide subacute care. The regulations shall: (1) establish applicable criteria and standards, including standards requiring an applicant for a hospital-based subacute care unit to demonstrate the need to establish a subacute care unit; and (2) allow the Commission to approve no more than 10 hospital-based units within a subacute bed pool of comprehensive care beds that shall not exceed 175 beds statewide.