

(3) Under the payment system, reimbursement for each health care practitioner shall be comprised of the following numeric factors:

(i) A numeric factor representing the resources of the health care practitioner necessary to provide health care services;

(ii) A numeric factor representing the relative value of a health care service, as classified by a code, compared to that of other health care services; and

(iii) A numeric factor representing a conversion modifier used to adjust reimbursement.

(4) To prevent overpayment of claims for surgery or services, in developing the payment system under this section, the Commission, to the extent practicable, shall establish standards to prohibit the unbundling of codes and the use of reimbursement maximization programs, commonly known as "upcoding".

(5) In developing the payment system under this section, the Commission shall consider the underlying methodology used in the resource based relative value scale established under 42 U.S.C. § 1395w-4.

(6) The Commission and the licensing boards shall develop, by regulation, appropriate sanctions, including, where appropriate, notification to the Insurance Fraud Unit of the State, for health care practitioners who violate the standards established by the Commission to prohibit unbundling and upcoding.

19-1515.

(a) (1) The Commission shall assess a fee on:

(i) All payors; and

(ii) All health care practitioners.

(2) (i) The total fees assessed by the Commission shall be derived one-third from health care practitioners and two-thirds from payors.

(ii) The Commission may adopt a regulation that waives the fee assessed under this section for a specific class of health care practitioners.

(3) The total fees assessed by the Commission may not exceed \$5,000,000 in any fiscal year.

(4) The Commission shall pay all funds collected from fees assessed in accordance with this section into the Health Care Access and Cost Fund.

(5) The fees assessed in accordance with this section shall be used only for the purposes authorized under this subtitle.

(b) The fees assessed in accordance with this section on health care practitioners shall be:

(1) Included in the licensing fee paid to the Board; and

(2) Transferred to the Commission on a quarterly basis.