

PROVIDED, PROPOSED, OR RECOMMENDED BY THE HEALTH CARE PRACTITIONER WITHOUT REFERENCE TO THE MEDICAL APPROPRIATENESS OR NECESSITY OF THE SERVICES.

(D) (1) A CARRIER SHALL PROVIDE A HEALTH CARE PRACTITIONER WITH A WRITTEN COPY OF:

(I) A SCHEDULE OF APPLICABLE FEES FOR UP TO THE TWENTY MOST COMMON SERVICES BILLED BY A HEALTH CARE PRACTITIONER IN THAT SPECIALTY;

(II) A DESCRIPTION OF THE CODING GUIDELINES USED BY THE CARRIER THAT ARE APPLICABLE TO THE SERVICES BILLED BY A HEALTH CARE PRACTITIONER IN THAT SPECIALTY; AND

(III) THE INFORMATION ABOUT THE PRACTITIONER AND THE METHODOLOGY THAT THE CARRIER USES TO DETERMINE WHETHER TO:

1. INCREASE OR REDUCE THE PRACTITIONER'S LEVEL OF REIMBURSEMENT; AND

2. PROVIDE A BONUS OR OTHER INCENTIVE-BASED COMPENSATION TO THE PRACTITIONER

(2) A CARRIER SHALL PROVIDE THE INFORMATION REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION IN EACH OF THE FOLLOWING INSTANCES:

(I) AT THE TIME OF CONTRACT EXECUTION;

(II) 30 DAYS PRIOR TO A CHANGE; AND

(III) UPON REQUEST OF THE HEALTH CARE PRACTITIONER

(3) THE ADMINISTRATION MAY ADOPT REGULATIONS TO CARRY OUT THE PROVISIONS OF THIS SUBSECTION.

[(d)] (E) (1) Except as provided in paragraph (2) of this subsection, a carrier may not reimburse a health care practitioner in an amount that is less than the cost to the health care practitioner for the cost of an oncology drug covered under the patient's health benefit policy, plan, or certificate used by the health care practitioner in treating a patient in the office of the health care practitioner.

(2) A carrier may reimburse a health care practitioner an amount that is less than the cost to the health care practitioner for the cost of an oncology drug used by the health care practitioner in treating a patient in the office of the health care practitioner if the carrier provides an alternative mechanism or program for the health care practitioner to use to obtain the oncology drug.

[(e)] (F) (1) A carrier that compensates health care practitioners wholly or partly on a capitated basis may not retain any capitated fee attributable to an enrollee or covered person during an enrollee's or covered person's contract year.