

(ii) Radiological or diagnostic imagery; or

(iii) Laboratory services.

(3) "Office facility" does not include any office, facility, or service operated by a hospital and regulated under Subtitle 2 of this title.

[(h)](1) "Payor" means:

(1) A health insurer or nonprofit health service plan that holds a certificate of authority and provides health insurance policies or contracts in the State in accordance with this article or the Insurance Article;

(2) A health maintenance organization that holds a certificate of authority in the State; or

(3) A third party administrator as defined in § 15-111 of the Insurance Article.

19-1502.

(a) There is a Maryland Health Care Access and Cost Commission.

(b) The Commission is an independent commission that functions in the Department.

(c) The purpose of the Commission is to:

(1) Develop health care cost containment strategies to help provide access to appropriate quality health care services for all Marylanders, after consulting with the Health Resources Planning Commission and the Health Services Cost Review Commission;

(2) Facilitate the public disclosure of medical claims data for the development of public policy;

(3) Establish and develop a medical care data base on health care services rendered by health care practitioners;

(4) Encourage the development of clinical resource management systems to permit the comparison of costs between various treatment settings and the availability of information to consumers, providers, and purchasers of health care services;

(5) In accordance with Title 15, Subtitle 12 of the Insurance Article, develop:

(i) A uniform set of effective benefits to be included in the Comprehensive Standard Health Benefit Plan; and

(ii) A modified health benefit plan for medical savings accounts;

(6) Analyze the medical care data base and provide, in aggregate form, an annual report on the variations in costs associated with health care practitioners;