

- (i) The input costs and other underlying factors that contribute to the rising cost of health care in this State and in the United States;
- (ii) The resources necessary for the delivery of quality health care;
- (iii) The additional costs associated with aging populations and new technology;
- (iv) The potential impacts of federal laws on health care costs; and
- (v) The savings associated with the implementation of modified practice patterns.

(h) Nothing in this section shall have the effect of impairing the ability of a health maintenance organization to contract with health care practitioners or any other individual under mutually agreed upon terms and conditions.

(i) A professional organization or society that performs activities in good faith in furtherance of the purposes of this section is not subject to criminal or civil liability under the Maryland Anti-Trust Act for those activities.

[19-1516.] 19-137.

(a) The Commission may implement a system to encourage health care practitioners to voluntarily control the costs of health care services.

(b) The Commission may require health care practitioners of selected health care specialties to cooperate with licensed operators of clinical resource management systems that allow health care practitioners to critically analyze their charges and utilization of services in comparison to their peers.

(c) If the Commission determines that clinical resource management systems are not available in the private sector, the Commission, in consultation with interested parties including payors, health care practitioners, and the [Maryland Hospital Association] ASSOCIATION OF MARYLAND HOSPITALS AND HEALTH SYSTEMS, may develop a clinical resource management system.

(d) The Commission may adopt regulations to govern the licensing of clinical resource management systems to ensure the accuracy and confidentiality of information provided by the system.

[19-1513.] 19-138.

In any matter that relates to the utilization or cost of health care services rendered by health care practitioners or office facilities, the Commission may:

- (1) Hold a public hearing;
- (2) Conduct an investigation; or
- (3) Require the filing of any reasonable information.