

[(d)](E) (1) To the extent practicable, when collecting the data required under subsection [(b)] (C) of this section, the Commission shall utilize any standardized claim form or electronic transfer system being used by health care practitioners, office facilities, and payors.

(2) The Commission shall develop appropriate methods for collecting the data required under subsection [(b)] (C) of this section on subscribers or enrollees of health maintenance organizations.

[(e)](F) Until the provisions of § 19-135 of this subtitle are fully implemented, where appropriate, the Commission may limit the data collection under this section.

[(f)](G) (1) By October 1, 1995 and each year thereafter, the Commission shall publish an annual report on those health care services selected by the Commission that:

[(1)](I) Describes the variation in fees charged by health care practitioners and office facilities on a statewide basis and in each health service area for those health care services; and

[(2)](II) Describes the geographic variation in the utilization of those health care services.

(2) (I) ON AN ANNUAL BASIS, THE COMMISSION SHALL PUBLISH:

1. THE TOTAL REIMBURSEMENT FOR ALL HEALTH CARE SERVICES OVER A 12-MONTH PERIOD;

2. THE TOTAL REIMBURSEMENT FOR EACH HEALTH CARE SPECIALITY OVER A 12-MONTH PERIOD;

3. THE TOTAL REIMBURSEMENT FOR EACH CODE OVER A 12-MONTH PERIOD; AND

4. THE ANNUAL RATE OF CHANGE IN REIMBURSEMENT FOR HEALTH SERVICES BY HEALTH CARE SPECIALTIES AND BY CODE.

(II) IN ADDITION TO THE INFORMATION REQUIRED UNDER ITEM (I) OF THIS PARAGRAPH, THE COMMISSION MAY PUBLISH ANY OTHER INFORMATION THAT THE COMMISSION DEEMS APPROPRIATE, INCLUDING INFORMATION ON CAPITATED HEALTH CARE SERVICES.

[(g)](H) In developing the medical care data base, the Commission shall consult with representatives of the Health Services Cost Review Commission, health care practitioners, payors, and hospitals to ensure that the medical care data base is compatible with, may be merged with, and does not duplicate information collected by the Health Services Cost Review Commission.

(i) The Commission, in consultation with the Insurance Commissioner, payors, health care practitioners, and hospitals, may adopt by regulation standards for the electronic submission of data and submission and transfer of the uniform claims forms established under § 15-1003 of the Insurance Article.