

(III) PRIVATE INSURANCE; AND

(IV) PRIVATE FUNDS; ~~AND~~

(2) FOR THE MARYLAND MEDICAL ASSISTANCE PROGRAM, THE COST INCURRED AND CHARGES RATES PAID BY FOR EACH CATEGORY OF PATIENT BASED ON THE LEVEL OF CARE<sup>o</sup> NEEDED;

(3) FOR PATIENTS PAYING WITH PRIVATE FUNDS:

(I) THE BASIC RATE CHARGED BY THAT RELATED INSTITUTION FOR A BASE RATE; AND

(II) FOR SERVICES NOT INCLUDED IN THE BASE RATE. A LIST OF THOSE SERVICES BY CATEGORY AND THE AMOUNT CHARGED BY THE RELATED INSTITUTION FOR THE SERVICES; AND

(4) THE TOTAL COST OF OPERATING THE RELATED INSTITUTION.

(C) (1) THE REPORT REQUIRED UNDER THIS SECTION SHALL BE IN A FORM DEVELOPED BY THE COMMISSION IN COOPERATION WITH REPRESENTATIVES OF THE LONG-TERM CARE INDUSTRY AND CONSUMERS.

(2) TO THE EXTENT POSSIBLE, THE REPORT REQUIRED UNDER THIS SECTION SHALL USE EXISTING DATA PREVIOUSLY SUBMITTED TO THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.

(D) EACH YEAR, ON OR BEFORE JUNE 30, THE COMMISSION SHALL COMPILE THE REPORTS REQUIRED UNDER THIS SECTION FOR THE PREVIOUS YEAR AND SEND A COPY OF THE REPORT TO THE OFFICE ON AGING.

(E) THE COMMISSION MAY ADOPT REGULATIONS TO IMPLEMENT THE PROVISIONS OF THIS SECTION.

(F) IF A RELATED INSTITUTION FAILS TO PROVIDE THE INFORMATION REQUIRED UNDER THIS SECTION, THE COMMISSION MAY:

(1) IMPOSE A PENALTY OF UP TO \$100 PER DAY FOR EACH DAY THE VIOLATION CONTINUES AFTER CONSIDERATION OF THE ~~WILLFULNESS~~ WILLFULNESS AND SERIOUSNESS OF THE WITHHOLDING AS WELL AS ANY PAST HISTORY OF WITHHOLDING OF INFORMATION;

(2) ISSUE AN ADMINISTRATIVE ORDER THAT REQUIRES THE APPLICANT TO PROVIDE THE INFORMATION; OR

(3) APPLY TO THE CIRCUIT COURT IN THE COUNTY WHERE THE RELATED INSTITUTION IS LOCATED FOR LEGAL RELIEF CONSIDERED APPROPRIATE BY THE COMMISSION.