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**By: Senator Hollinger**

Introduced and read first time: February 2, 1996

Assigned to: Finance

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A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Health Care Access and Cost Commission - Collection of Data - Self-Pay**  
3 **Patients**

4 FOR the purpose of prohibiting the Maryland Health Care Access and Cost Commission  
5 from collecting certain data for patient encounters for which the patients elect to  
6 self pay rather than seek reimbursement by certain payors; and generally relating to  
7 the prohibition against the collection of data concerning self-pay patients by the  
8 Maryland Health Care Access and Cost Commission.

9 BY repealing and reenacting, with amendments,  
10 Article - Health - General  
11 Section 19-1507  
12 Annotated Code of Maryland  
13 (1990 Replacement Volume and 1995 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
15 MARYLAND, That the Laws of Maryland read as follows:

16 **Article - Health - General**

17 19-1507.

18 (a) The Commission shall establish a Maryland medical care data base to compile  
19 statewide data on health services rendered by health care practitioners and office  
20 facilities selected by the Commission.

21 (b) In addition to any other information the Commission may require by  
22 regulation, the medical care data base shall:

23 (1) [Collect] EXCEPT AS OTHERWISE PROVIDED UNDER SUBSECTION  
24 (C) OF THIS SECTION, COLLECT for each type of patient encounter with a health care  
25 practitioner or office facility designated by the Commission:

26 (i) The demographic characteristics of the patient;

27 (ii) The principal diagnosis;

28 (iii) The procedure performed;

29 (iv) The date and location of where the procedure was performed;

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1 (v) The charge for the procedure;

2 (vi) If the bill for the procedure was submitted on an assigned or  
3 nonassigned basis; and

4 (vii) If applicable, a health care practitioner's universal identification  
5 number;

6 (2) Collect appropriate information relating to prescription drugs for each  
7 type of patient encounter with a pharmacist designated by the Commission; and

8 (3) Collect appropriate information relating to health care costs, utilization,  
9 or resources from payors and governmental agencies.

10 (C) THE COMMISSION MAY NOT COLLECT ANY DATA UNDER THIS SECTION  
11 FOR ANY PATIENT ENCOUNTER FOR WHICH THE PATIENT ELECTS TO SELF-PAY  
12 RATHER THAN SEEK REIMBURSEMENT BY A PAYOR.

13 [(c) (1)] (D) (1) The Commission shall adopt regulations governing the access  
14 and retrieval of all medical claims data and other information collected and stored in the  
15 medical care data base and any claims clearinghouse licensed by the Commission and may  
16 set reasonable fees covering the costs of accessing and retrieving the stored data.

17 (2) These regulations shall ensure that confidential or privileged patient  
18 information is kept confidential.

19 (3) Records or information protected by the privilege between a health care  
20 practitioner and a patient, or otherwise required by law to be held confidential, shall be  
21 filed in a manner that does not disclose the identity of the person protected.

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

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

29 [(e)] (F) Until the provisions of § 19-1508 of this subtitle are fully implemented,  
30 where appropriate, the Commission may limit the data collection under this section.

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

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

36 (2) Describes the geographic variation in the utilization of those health care  
37 services.

38 [(g)] (H) In developing the medical care data base, the Commission shall consult  
39 with:

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1 (1) Representatives of health care practitioners, payors, and hospitals; and

2 (2) Representatives of the Health Services Cost Review Commission and  
3 the Health Resources Planning Commission to ensure that the medical care data base is  
4 compatible with, may be merged with, and does not duplicate information collected by the  
5 Health Services Cost Review Commission hospital discharge data base, or data collected  
6 by the Health Resources Planning Commission as authorized in § 19-107 of this title.

7 (i) The Commission, in consultation with the Insurance Commissioner, payors,  
8 health care practitioners, and hospitals, may adopt by regulation standards for the  
9 electronic submission of data and submission and transfer of the uniform claims forms  
10 established under Article 48A, § 490P of the Code.

11 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
12 October 1, 1996.