

2. The Department of Health and Mental Hygiene shall study and develop recommendations regarding a policy for liability of family members of Program recipients who have the ability to pay for services rendered by the Program to the Program recipient. The results of this study shall be submitted on or before December 17, 1990.

3. The Department of Fiscal Services shall conduct a management study of the administration of the Program's eligibility determination component. The results of this study shall be submitted on or before July 17, 1989.

4. The Department of Health and Mental Hygiene and the Department of Human Resources shall report on the results of their efforts to establish a mechanism for reporting Aid to Families with Dependent Children (AFDC) case closures to the Department of Health and Mental Hygiene on or before July 17, 1989.

5. The Department of Health and Mental Hygiene shall apply for available demonstration grants and shall work with the Department of Human Resources to develop incentives, perhaps using a sliding scale fee, for Program recipients to become employed and continue to receive Program benefits. The results of these efforts shall be submitted on or before November 17, 1990.

6. For elective surgery procedures under the Program, the Department of Health and Mental Hygiene shall study the feasibility and desirability of requiring second surgical opinions where appropriate and directing admissions to hospitals with lower rates. The results of this study shall be submitted on or before July 17, 1989.

7. The Department of Health and Mental Hygiene shall report on the results of its efforts to divert unnecessary hospital emergency room and outpatient department utilization. The results of these efforts shall be submitted on or before August 17, 1989.

8. The Department of Health and Mental Hygiene, in conjunction with the Health Resources Planning Commission, the Department of Housing and Community Development, the Office on Aging, and the Department of Human Resources shall:

A. Review the adequacy of existing alternatives to providing care in comprehensive care facilities;

B. Determine whether changes are needed to support the ability of existing services to keep persons in the community and out of institutional settings.