\$250,000 in State funds, of the effectiveness of the Family Investment Program created by this Act. The outside evaluation shall conform with any evaluation requirements under a federal waiver. The Department may seek other sources of funds to carry out the provisions of this section.

SECTION 16. 21. AND BE IT FURTHER ENACTED, That Section 5 of this Act shall take effect October 1, 1996 July 1, 1997. It is the intent of the General Assembly that the Department of Labor, Licensing, and Regulation begin implementation of Section 5 of this Act, as soon as the requirements of Section 16 of this Act are met.

SECTION 22. AND BE IT FURTHER ENACTED, That provisions of §§ 16–203 and 16–208 of the Transportation Article, as enacted by Section 6 of this Act, and provisions of §§ 10–101 and 10–119 of the Family Law Article, as enacted by Section 4 of this Act, shall take effect October 1, 1996.

SECTION 9. 17. 23. AND BE IT FURTHER ENACTED, That, subject to the provisions of Section 7 Sections 9 and 16 9, 21, and 22 of this Act, this Act shall take effect July 1, 1996.

Approved May 14, 1996.

CHAPTER 352

(Senate Bill 750)

AN ACT concerning

Maryland Medical Assistance Program - Managed Care Organizations

FOR the purpose of authorizing the Department of Health and Mental Hygiene to provide guaranteed eligibility in the Maryland Medical Assistance Program for a certain period under certain circumstances, authorizing the Department to require Program recipients to enroll in managed care organizations; authorizing the Department to prohibit prohibiting, under certain circumstances, managed care organizations from enrolling Program recipients; establishing certain requirements for managed care organizations participating in the Program; authorizing requiring the Department to require assure that, under certain circumstances, managed care organizations to include establish a certain mechanism for providers who have historically served Program recipients; prohibiting a managed care organization from denying or terminating participation on its provider panel under certain eircumstances; providing that certain provisions of law apply to managed care organizations; requiring managed care organizations to meet certain requirements; repealing certain contingency provisions; requiring certain reports and appearances; authorizing the Department to take certain actions; requiring the Department to take certain actions, including making capitation payments in a certain manner; requiring school-based clinics to take certain actions and provide certain information; requiring a certain delivery system for certain mental health care; requiring the Health Resources Planning Commission, in consultation with the Department of Health and Mental Hygiene and the Health Services Cost Review