- PARAGRAPH (I) OF THIS SUBSECTION MAY PROVIDE GUARANTEED ELIGIBILITY FOR EACH ENROLLEE FOR UP TO 6 MONTHS, UNLESS AN ENROLLEE OBTAINS HEALTH INSURANCE THROUGH ANOTHER SOURCE.
- (4) (1) <u>THE SECRETARY MAY EXCLUDE SPECIFIC POPULATIONS OR</u> SERVICES FROM THE PROGRAM DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION.
- (II) FOR ANY POPULATIONS OR SERVICES EXCLUDED UNDER THIS PARAGRAPH, THE SECRETARY MAY AUTHORIZE A MANAGED CARE ORGANIZATION, TO PROVIDE THE SERVICES OR PROVIDE FOR THE POPULATION, INCLUDING AUTHORIZATION OF A SEPARATE DENTAL MANAGED CARE ORGANIZATION OR A MANAGED CARE ORGANIZATION TO PROVIDE SERVICES TO PROGRAM RECIPIENTS WITH SPECIAL NEEDS.
- (5) (I) EXCEPT FOR A SERVICE EXCLUDED BY THE SECRETARY UNDER PARAGRAPH (4) OF THIS SUBSECTION, EACH MANAGED CARE ORGANIZATION SHALL PROVIDE ALL THE BENEFITS REQUIRED BY REGULATIONS ADOPTED UNDER PARAGRAPH (2) OF THIS SUBSECTION.
- (II) FOR A POPULATION OR SERVICE EXCLUDED BY THE SECRETARY UNDER PARAGRAPH (4) OF THIS SUBSECTION, THE SECRETARY MAY AUTHORIZE A MANAGED CARE ORGANIZATION TO PROVIDE ONLY FOR THAT POPULATION OR PROVIDE ONLY THAT SERVICE.
- (III) A MANAGED CARE ORGANIZATION MAY SUBCONTRACT SPECIFIED REQUIRED SERVICES TO A HEALTH CARE PROVIDER THAT IS LICENSED OR AUTHORIZED TO PROVIDE THOSE SERVICES.
- (6) EXCEPT FOR THE PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY ("PACE") PROGRAM, THE SECRETARY MAY NOT INCLUDE THE LONG-TERM CARE POPULATION OR LONG-TERM CARE SERVICES IN THE PROGRAM DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION.
- (7) THE PROGRAM DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL ENSURE THAT ENROLLEES HAVE ACCESS TO A PHARMACY THAT:
 - (I) IS LICENSED IN THE STATE; AND
- (II) <u>IS WITHIN A REASONABLE DISTANCE FROM THE ENROLLEE'S RESIDENCE.</u>
- (8) FOR CAUSE, THE DEPARTMENT MAY DISENROLL ENROLLEES FROM A MANAGED CARE ORGANIZATION AND ENROLL THEM IN ANOTHER MANAGED CARE ORGANIZATION.
 - (2) A managed care [plan] ORGANIZATION shall:
- (3) (2) IF A MANAGED CARE ORGANIZATION AGREES TO PARTICIPATE IN THE PROGRAM, THE EACH MANAGED CARE ORGANIZATION SHALL:
- (i) Have a quality assurance program in effect which is subject to the approval of the Department AND WHICH, AT A MINIMUM: