AND

(XIV) PROVIDE OR ARRANGE TO PROVIDE ALL MEDICAID-COVERED SERVICES REQUIRED TO COMPLY WITH STATE STATUTES AND REGULATIONS MANDATING HEALTH AND MENTAL HEALTH SERVICES FOR CHILDREN IN STATE SUPERVISED CARE:

- ACCORDING TO STANDARDS SET BY THE DEPARTMENT;
- <u>2. LOCALLY, TO THE EXTENT THE SERVICES ARE AVAILABLE LOCALLY;</u>

(XV) MAKE AVAILABLE TO ITS ENROLLEES THE DEPARTMENT'S SUMMARY OF THE QUALITY ASSURANCE PROGRAM REQUIREMENTS:

(XVI) SUBMIT TO THE DEPARTMENT AGGREGATE INFORMATION FROM THE QUALITY ASSURANCE PROGRAM, INCLUDING COMPLAINTS AND RESOLUTIONS FROM THE ENROLLEE AND PROVIDER GRIEVANCE SYSTEM AND HOTLINE, AND SYSTEMS, THE ENROLLEE HOTLINE, AND ENROLLEE SATISFACTION SURVEYS;

(XVII) INITIALLY PROVIDE, AT A MINIMUM, THE SAME-SERVICE LEVEL THAT WAS CONTRACTUALLY REQUIRED TO BE PROVIDED BY MANAGED CARE ORGANIZATIONS TO MEDICAID ENROLLESS AS OF JANUARY 1, 1996;

(XVIII) REIMBURSE FOR THE FOLLOWING HEALTH CARE SERVICES
PROVIDED, WITHOUT PRIOR APPROVAL FROM THE MANAGED CARE
ORGANIZATION, TO AN ENROLLEE IN A HOSPITAL EMERGENCY FACILITY:

- (10) (I) A MANAGED CARE ORGANIZATION SHALL REIMBURSE A HOSPITAL EMERGENCY FACILITY AND PROVIDER FOR
- 1. HEALTH CARE SERVICES THAT MEET THE DEFINITION OF EMERGENCY SERVICES IN § 19–701 OF THIS ARTICLE;
- 2. MEDICAL SCREENING SERVICES RENDERED TO MEET THE REQUIREMENTS OF THE FEDERAL EMERGENCY MEDICAL TREATMENT AND ACTIVE LABOR ACT;
- 3. MEDICALLY NECESSARY SERVICES IF THE MANAGED CARE ORGANIZATION AUTHORIZED, REFERRED, OR OTHERWISE ALLOWED THE ENROLLEE TO USE THE EMERGENCY FACILITY AND THE MEDICALLY NECESSARY SERVICES ARE RELATED TO THE CONDITION FOR WHICH THE ENROLLEE WAS ALLOWED TO USE THE EMERGENCY FACILITY; AND
- 4. MEDICALLY NECESSARY SERVICES THAT RELATE TO THE CONDITION PRESENTED AND THAT ARE PROVIDED BY THE PROVIDER IN THE EMERGENCY FACILITY TO THE ENROLLEE IF THE MANAGED CARE ORGANIZATION FAILS TO PROVIDE 24-HOUR ACCESS TO A PHYSICIAN AS REQUIRED IN THE DEPARTMENT'S REGULATIONS; BY THE DEPARTMENT.