

(III) BEFORE THE DEPARTMENT DELEGATES RESPONSIBILITY TO A LOCAL HEALTH DEPARTMENT TO MAINTAIN THE OMBUDSMAN PROGRAM FOR A COUNTY, A LOCAL HEALTH DEPARTMENT THAT IS ALSO A MEDICAID PROVIDER MUST RECEIVE THE APPROVAL OF THE SECRETARY AND THE LOCAL GOVERNING BODY.

~~(3) THE SECRETARY MAY PROHIBIT MANAGED CARE ORGANIZATIONS FROM ENROLLING PROGRAM RECIPIENTS.~~

~~(7) (13) A MANAGED CARE ORGANIZATION MAY NOT:~~

(I) WITHOUT AUTHORIZATION BY THE DEPARTMENT, ENROLL AN INDIVIDUAL WHO AT THE TIME IS A PROGRAM RECIPIENT; OR

(II) HAVE FACE-TO-FACE OR TELEPHONE CONTACT, OR OTHERWISE SOLICIT WITH AN INDIVIDUAL WHO AT THE TIME IS A PROGRAM RECIPIENT BEFORE THE PROGRAM RECIPIENT ENROLLS IN THE MANAGED CARE ORGANIZATION UNLESS:

1. AUTHORIZED BY THE DEPARTMENT; OR
2. THE PROGRAM RECIPIENT INITIATES CONTACT.

~~(8) THE DEPARTMENT SHALL ESTABLISH A HEALTH RISK ASSESSMENT TO BE ADMINISTERED AT THE TIME OF ENROLLMENT TO ASSURE THAT PERSONS IN NEED OF SPECIAL OR IMMEDIATE HEALTH CARE SERVICES WILL RECEIVE APPROPRIATE CARE ON A TIMELY BASIS.~~

(14) (I) THE DEPARTMENT SHALL BE RESPONSIBLE FOR ENROLLING PROGRAM RECIPIENTS INTO MANAGED CARE ORGANIZATIONS.

(II) THE DEPARTMENT MAY CONTRACT WITH AN ENTITY TO PERFORM THE ENROLLMENT FUNCTION.

(III) THE DEPARTMENT OR ITS ENROLLMENT CONTRACTOR SHALL ADMINISTER A HEALTH RISK ASSESSMENT DEVELOPED BY THE DEPARTMENT TO ENSURE THAT INDIVIDUALS WHO NEED SPECIAL OR IMMEDIATE HEALTH CARE SERVICES WILL RECEIVE THE SERVICES ON A TIMELY BASIS.

(IV) THE DEPARTMENT OR ITS ENROLLMENT CONTRACTOR:

1. MAY ADMINISTER THE HEALTH RISK ASSESSMENT ONLY AFTER THE PROGRAM RECIPIENT HAS CHOSEN A MANAGED CARE ORGANIZATION; AND

2. SHALL FORWARD THE RESULTS OF THE HEALTH RISK ASSESSMENT TO THE MANAGED CARE ORGANIZATION CHOSEN BY THE PROGRAM RECIPIENT WITHIN 5 BUSINESS DAYS.

~~[(5)] (4) (i) (9) The Secretary may exclude specific populations or services from any program developed under paragraph (1) of this subsection.~~