- (I) THE SECRETARY MAY EXCLUDE ALL DENTAL PROCEDURES AND SERVICES FROM ANY PROGRAM DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION.
- (II) THE SECRETARY MAY ESTABLISH A DENTAL MANAGED CARE PROGRAM FOR ENROLLEES.
- (ii) The Secretary may establish a managed care program for any population or service excluded under subparagraph (i) of this paragraph.
- (III) THE SECRETARY MAY ESTABLISH A MANAGED CARE PROGRAM FOR PARTICIPANTS IN THE "PACE" PROJECT.
- [(6)] (5) (10) (15) For a managed care [plan] ORGANIZATION with which the Secretary contracts to provide services to Program recipients under this subsection, the Secretary may require as a condition of that contract that the managed care [plan]-ORGANIZATION include SHALL INITIALLY ESTABLISH A MECHANISM TO INITIALLY ASSURE THAT A EACH HISTORIC PROVIDER THAT MEETS THE DEPARTMENT'S QUALITY STANDARDS HAS THE OPPORTUNITY TO CONTINUE TO SERVE PROGRAM RECIPIENTS AS A SUBCONTRACTOR OF AT LEAST ONE MANAGED CARE ORGANIZATION[, to the extent economically feasible, particular providers in providing those services in the following circumstances:
- (i) In areas that have been served historically by a community health center, the Secretary may require a managed care plan to include that community health center in its delivery of service to Program recipients who have traditionally obtained health care services through that community health center;
- (ii) For providers with residency programs for the training of health care professionals, the Secretary may require a managed care plan to include those providers in its delivery of service to Program recipients; and
- (iii) In other circumstances to meet particular needs of Program recipients or the community being served as provided in regulations adopted by the Secretary.] PROVIDERS WHO HAVE HISTORICALLY SERVED PROGRAM RECIPIENTS, IN ACCORDANCE WITH REGULATIONS ISSUED BY THE SECRETARY.
- (11) THE DEPARTMENT SHALL MAKE CAPITATION PAYMENTS THAT ARE ACTUARIALLY ADJUSTED TO:
- (I) REFLECT THE RELATIVE RISK ASSUMED, AS DETERMINED BY THE DEPARTMENT; AND
- (II) ENCOURAGE MANAGED CARE ORGANIZATIONS TO DEVELOP EXPERTISE IN TREATING SPECIAL NEEDS POPULATIONS.
- (12) (I) A MANAGED CARE ORGANIZATION SHALL REPORT ANNUALLY TO THE DEPARTMENT, AS THE DEPARTMENT PRESCRIBES, THE EXPENSE AND LOSS RATIOS INCURRED BY THE MANAGED CARE ORGANIZATION IN DELIVERING SERVICES TO ENROLLEES.