

(a) (1) The Secretary of Health and Mental Hygiene shall establish a Long-Term Managed Care Advisory Committee, composed of no more than 15 members and including legislators, consumers, health care providers, advocates, and State and local agency representatives, to advise on development of a managed care proposal for the Medicaid long-term care population.

(2) The Committee shall hear public testimony and conduct public meetings in each region of the State concerning managed care issues for the continuum of long-term health care services.

(3) By November 1, 1996, the Committee shall issue a report to the Secretary with findings and recommendations addressing, at a minimum:

- (i) the population to be served;
- (ii) the types of services to be provided;
- (iii) the mechanisms for providing services;
- (iv) funding; and
- (v) implementation issues.

(4) By January 1, 1997, the Secretary shall develop and present to the Governor, and subject to § 2-1312 of the State Government Article, the General Assembly a managed care proposal for the Medicaid long-term care population.

(b) (1) Additionally, the Secretary may appoint a Long-Term Managed Care Technical Advisory Group, composed of individuals with technical, as well as programmatic, expertise to develop managed care pilot programs.

(2) The pilot programs, in selected regions of the State, may:

(i) encourage Medicaid recipients to join managed care plans for long-term care benefits coverage;

(ii) blend, to the extent possible, Medicaid and Medicare funds for managed care;

(iii) utilize varying eligibility criteria, in light of the continued expansion of the long-term care population; and

(iv) utilize innovative methods of long-range financing.

(3) Any data and information generated by these pilot programs shall be reviewed by the Long-Term Managed Care Advisory Committee and used in the design of managed care programs for the long-term care population.

~~SECTION 10. AND BE IT FURTHER ENACTED, That the Secretary of Health and Mental Hygiene is authorized to make prepaid payments to a program that provided services to individuals under: Title 7, Subtitle 3; Title 7, Subtitle 7, § 8-204; Title 8, Subtitle 4; Title 10, Subtitle 9; or Title 10, Subtitle 12 of the Health - General Article.~~