be transferred to the Subcabinet Fund when a child is returned from out–of–state.

Further, it is the intent of the General Assembly that the Medical Care Provider Reimbursements budget be expended in accordance with the budget detail presented to and approved by the General Assembly. Should the department wish to make a regulatory, policy, or procedural change which has an increase or decrease greater than $300,000 on the program's budget, whether or not the increase or decrease is offset in whole or in part by other action, it shall inform the budget committees of the change and the committees shall have 45 days to review and consider it before it becomes effective.

For the rates to be paid to Managed Care Organizations (MCOs) commencing on January 1, 2000 and ending on December 31, 2000, the Department of Health and Mental Hygiene is directed to submit to the budget committees a detailed plan of the steps it will take to assure accurate and actuarially sound rates. The plan shall include, but not be limited to:

(1) how the department will oversee its rate setting contractors;

(2) how the department will provide the MCOs with adequate information on the methodology and on the level of the rates;

(3) a time–line that allows MCOs adequate time to evaluate the impact of any proposed rates on their businesses; and

(4) how the department will monitor MCOs financial and utilization data, including the collection of encounter data.

The department shall report quarterly on the progress made in implementing the plan. The plan shall be submitted to the