

was enrolled in a Medicare Plus Choice plan on or before December 31, 1999 and lost coverage under that plan on or after January 1, 2000, of the existence of and eligibility criteria for the Plan:

(b) (1) For the first 90 days following the effective date of this Act, the carrier that is required to provide the Short Term Prescription Drug Subsidy Plan under § 15-606 of the Insurance Article, as enacted by Section 3 of this Act, shall enroll in the Short Term Prescription Drug Subsidy Plan only eligible individuals who:

(i) were enrolled in a Medicare Plus Choice managed care program on or before December 31, 1999;

(ii) lost coverage under a Medicare Plus Choice managed care plan after December 31, 1999; and

(iii) have an annual household income at or below 300 percent of the federal poverty guidelines.

(2) After the 90th day following the effective date of this Act, the carrier may enroll any individual eligible under § 15-601(e) of the Health General Article as enacted by Section 2 of this Act.

SECTION 3. AND BE IT FURTHER ENACTED, That Section 2 of this Act shall take effect June 1, 2001.

SECTION 16. AND BE IT FURTHER ENACTED, That Sections 9, 10, and 15 of this Act shall take effect June 1, 2001.

SECTION 4. 17. AND BE IT FURTHER ENACTED, That, except as provided in Section 3 Sections 13, 14, 16 of this Act, this Act shall take effect October July 1, 2001.

FOR the purpose of establishing certain prescription drug benefit programs; establishing eligibility criteria for certain prescription drug benefit programs; requiring the Department of Health and Mental Hygiene to administer and operate a certain program as permitted by federal law or waiver; providing for an exception to a certain eligibility limitation; authorizing the Department to establish certain mechanisms to recover certain administrative costs, to reimburse certain participating pharmacies, and to allow certain pharmacies to charge a certain processing fee; requiring the Secretary of Health and Mental Hygiene to adopt certain regulations; requiring the Department to apply for a certain waiver expansion to implement certain programs; requiring the Maryland Health Care Foundation to operate and administer a certain program; requiring the Foundation to contract with certain government or nonprofit organizations to operate and administer the program; specifying the funding for the program; authorizing certain funds to be spent on certain interim supplies of prescription drugs; requiring the Foundation to make the program available in each geographic region of the State; altering the eligibility requirements for the Short-Term Prescription Drug Subsidy Plan; altering certain definitions; repealing certain definitions; altering the conditions for a carrier to provide the subsidy plan; extending the duration of the subsidy plan; lowering the monthly