

(3) CONSISTENT WITH THE FEDERAL WAIVER UNDER PARAGRAPH (1) OF THIS SUBSECTION, IF THE SECRETARY ESTABLISHES A PROGRAM UNDER PARAGRAPH (2) OF THIS SUBSECTION, THE PROGRAM MAY NOT OPERATE IN MORE THAN TWO AREAS OF THE STATE.

(C) ANY WAIVER DEVELOPED UNDER THIS SECTION SHALL INCLUDE THE FOLLOWING GOALS AND OBJECTIVES:

(1) INCREASING PARTICIPANT SATISFACTION;

(2) ALLOWING PARTICIPANTS TO AGE IN PLACE;

(3) REDUCING MEDICAID EXPENDITURES BY ENCOURAGING THE MOST APPROPRIATE UTILIZATION OF HIGH QUALITY SERVICES; AND

(4) ENHANCING COMPLIANCE WITH THE FEDERAL AMERICANS WITH DISABILITIES ACT BY OFFERING COST-EFFECTIVE COMMUNITY-BASED SERVICES IN THE MOST APPROPRIATE HIGH QUALITY AND LEAST RESTRICTIVE SETTING.

(D) (1) THE BENEFITS PROVIDED BY THE COMMUNITY CHOICE PROGRAM SHALL INCLUDE THOSE SERVICES AVAILABLE UNDER THE MEDICAID STATE PLAN AND SERVICES COVERED UNDER HOME AND COMMUNITY-BASED SERVICES WAIVERS.

(2) EXCEPT WHEN SERVICES ARE LIMITED OR EXCLUDED FROM THE COMMUNITY CHOICE PROGRAM BY THE SECRETARY, THE COMMUNITY CARE ORGANIZATION SHALL PROVIDE ALL THE SERVICES ESTABLISHED IN REGULATION AND REQUIRED BY THE SECRETARY.

(3) THE SECRETARY MAY EXCLUDE SPECIFIC POPULATIONS.

(4) THE SECRETARY SHALL INCLUDE A DEFINITION OF "MEDICAL NECESSITY" IN ITS QUALITY AND ACCESS STANDARDS.

(5) NOTHING IN THE COMMUNITY CHOICE PROGRAM MAY PRECLUDE A NURSING HOME FROM UTILIZING AN INSTITUTIONAL PHARMACY OF ITS OWN CHOICE FOR THE PROVISION OF INSTITUTIONAL PHARMACY SERVICES AND BENEFITS FOR WAIVER ENROLLEES IN THE NURSING HOME.

(E) COMMUNITY CHOICE PROGRAM RECIPIENTS SERVED BY THE PROGRAM DEVELOPED UNDER THIS SECTION SHALL BE ALLOWED TO CHOOSE AMONG AT LEAST TWO COMMUNITY CARE ORGANIZATIONS THAT HAVE DEMONSTRATED A NETWORK CAPACITY SUFFICIENT TO MEET THE NEEDS OF THE POPULATION.

(F) (1) ON AN ANNUAL BASIS OR FOR CAUSE, AN ENROLLEE MAY CHOOSE TO DISENROLL FROM A COMMUNITY CARE ORGANIZATION AND ENROLL IN ANOTHER COMMUNITY CARE ORGANIZATION.

(2) EACH ENROLLEE RECEIVING SERVICES IN A NURSING HOME, AN ASSISTED LIVING FACILITY, OR AN ADULT DAY CARE FACILITY, A PSYCHIATRIC REHABILITATION PROGRAM, OR A RESIDENTIAL REHABILITATION PROGRAM SHALL HAVE THE OPTION OF REMAINING IN THE NURSING HOME, ASSISTED LIVING