

FACILITY, OR ADULT DAY CARE FACILITY, PSYCHIATRIC REHABILITATION PROGRAM, OR RESIDENTIAL REHABILITATION PROGRAM.

(3) AN ENROLLEE OF THE PROGRAM WHO QUALIFIES FOR NURSING LEVEL CARE MAY CHOOSE TO RECEIVE SERVICES IN A NURSING HOME OR IN THE COMMUNITY, IF THE COMMUNITY PLACEMENT IS COST-EFFECTIVE.

(4) THE COMMUNITY CHOICE PROGRAM SHALL ENSURE THAT ALL ENROLLEES IN THE PROGRAM MAINTAIN ACCESS TO PHARMACY BENEFITS, INCLUDING ALL CLASSES OF DRUGS, THAT ARE COMPARABLE TO THE BENEFITS PROVIDED IN THE MEDICAL ASSISTANCE PROGRAM.

(G) (1) EACH COMMUNITY CARE ORGANIZATION SHALL PROVIDE FOR THE BENEFITS DESCRIBED IN SUBSECTION (D) OF THIS SECTION.

(2) THIS SECTION MAY NOT BE CONSTRUED TO PREVENT A COMMUNITY CARE ORGANIZATION FROM PROVIDING ADDITIONAL BENEFITS THAT ARE NOT COVERED BY A CAPITATED RATE.

(3) (I) THE DEPARTMENT SHALL MAKE CAPITATION PAYMENTS TO EACH COMMUNITY CARE ORGANIZATION AS PROVIDED IN THIS PARAGRAPH.

(II) THE SECRETARY SHALL SET CAPITATION PAYMENTS AT A LEVEL THAT IS ACTUARIALLY ADJUSTED FOR THE BENEFITS PROVIDED.

(III) THE SECRETARY SHALL ADJUST CAPITATION PAYMENTS TO REFLECT THE RELATIVE RISK ASSUMED BY THE COMMUNITY CARE ORGANIZATION.

(H) THE DEPARTMENT SHALL REQUIRE COMMUNITY CARE ORGANIZATIONS TO BE CERTIFIED TO ACCEPT CAPITATED PAYMENTS FROM THE FEDERAL MEDICARE PROGRAM FOR INDIVIDUALS WHO ARE DUALY ELIGIBLE.

(I) THE COMMUNITY CHOICE PROGRAM SHALL INCLUDE:

(1) ADULTS WHO ARE DUALY ELIGIBLE;

(2) ADULT MEDICAID RECIPIENTS WHO MEET THE NURSING HOME LEVEL OF CARE STANDARD; AND

(3) MEDICAID RECIPIENTS OVER 65 YEARS OF AGE.

(J) (1) INDIVIDUALS ELIGIBLE FOR THE COMMUNITY CHOICE PROGRAM SHALL HAVE THE RIGHT TO ELECT TO RECEIVE SERVICES UNDER THE COMMUNITY CHOICE PROGRAM OR AN APPROVED PROGRAM OF ALL-INCLUSIVE CARE FOR THE ELDERLY.

(2) IF AN INDIVIDUAL ELIGIBLE FOR THE COMMUNITY CHOICE PROGRAM REQUIRES HOSPICE CARE, THE INDIVIDUAL SHALL ELECT TO RECEIVE HOSPICE CARE FROM A LICENSED HOSPICE PROGRAM UNDER A SEPARATE ARRANGEMENT AND PAYMENT FOR HOSPICE CARE PROVIDED TO THE INDIVIDUAL SHALL BE MADE DIRECTLY TO THE HOSPICE PROGRAM BY THE DEPARTMENT UNDER THE MEDICAID-ESTABLISHED RATE FOR HOSPICE CARE REIMBURSEMENT.