

(3) IF AN INDIVIDUAL ELIGIBLE FOR THE COMMUNITY CHOICE PROGRAM REQUIRES SPECIALTY MENTAL HEALTH SERVICES, THE INDIVIDUAL SHALL ELECT TO RECEIVE SPECIALTY MENTAL HEALTH SERVICES FROM AN APPROVED MENTAL HEALTH PROVIDER UNDER A SEPARATE ARRANGEMENT, AND PAYMENT FOR SPECIALTY MENTAL HEALTH SERVICES PROVIDED TO THE INDIVIDUAL SHALL BE MADE DIRECTLY TO THE MENTAL HEALTH PROVIDER BY THE DEPARTMENT UNDER THE MEDICAID-ESTABLISHED RATE FOR SPECIALTY MENTAL HEALTH SERVICES.

(K) (1) EACH COMMUNITY CARE ORGANIZATION SHALL MEET ALL REQUIREMENTS FOR CERTIFICATION BY THE DEPARTMENT.

(2) EACH COMMUNITY CARE ORGANIZATION SHALL:

(I) HAVE A QUALITY ASSURANCE PROGRAM, SUBJECT TO APPROVAL BY THE SECRETARY, WHICH SHALL:

1. PROVIDE FOR AN ENROLLEE GRIEVANCE SYSTEM, INCLUDING AN ENROLLEE HOTLINE;

2. PROVIDE FOR A PROVIDER GRIEVANCE SYSTEM, INCLUDING A PROVIDER HOTLINE;

3. PROVIDE FOR AN ENROLLEE SATISFACTION SURVEY; AND

4. PROVIDE FOR A CONSUMER ADVISORY BOARD TO RECEIVE REGULAR INPUT FROM ENROLLEES AND SUBMIT AN ANNUAL REPORT OF THE ADVISORY BOARD TO THE SECRETARY;

(II) SUBMIT SERVICE-SPECIFIC DATA IN A FORMAT SPECIFIED BY THE SECRETARY;

(III) INCLUDE PROVISIONS FOR CONSUMER DIRECTION OF PERSONAL ASSISTANCE SERVICES;

(IV) ENSURE NECESSARY PROVIDER CAPACITY IN ALL GEOGRAPHIC REGIONS WHERE THE COMMUNITY CARE ORGANIZATION IS APPROVED TO OPERATE;

(V) BE ACCOUNTABLE, AND HOLD ITS SUBCONTRACTORS ACCOUNTABLE, FOR MEETING ALL REQUIREMENTS, STANDARDS, CRITERIA, OR OTHER DIRECTIVES OF THE DEPARTMENT AND UPON FAILURE TO MEET THOSE STANDARDS, BE SUBJECT TO ONE OR MORE OF THE FOLLOWING PENALTIES:

1. FINES;

2. SUSPENSION OF FURTHER ENROLLMENT;

3. WITHHOLDING OF ALL OR PART OF A CAPITATION PAYMENT;

4. TERMINATION OF A CONTRACT;

5. DISQUALIFICATION FROM FUTURE PARTICIPATION; AND