- (3) <u>DEVELOP A STATEWIDE SINGLE POINT-OF-ENTRY SYSTEM</u> CONSISTING OF A DESIGNATED ENTITY IN EACH COUNTY AND BALTIMORE CITY TO:
 - (I) ACCEPT APPLICATIONS;
 - (II) MAKE ALL ELIGIBILITY DETERMINATIONS;
 - (III) ENROLL INDIVIDUALS IN THE PROGRAM; AND
 - (IV) PROVIDE COORDINATED SERVICES, INCLUDING:
 - 1. LEVEL-OF-CARE DETERMINATIONS;
 - 2. FINANCIAL DETERMINATIONS;
 - 3. PLAN OF CARE DETERMINATIONS;
 - 4. CASE MANAGEMENT SERVICES; AND
 - 5. OTHER SERVICES AS NEEDED.
- (O) IN DEVELOPING THE WAIVER APPLICATION AND REGULATIONS UNDER THIS SECTION, THE DEPARTMENT SHALL SOLICIT INPUT FROM, AND CONSULT WITH, REPRESENTATIVES OF INTERESTED AND AFFECTED PARTIES, INCLUDING:
 - (1) LEGISLATORS;
 - (2) AFFECTED STATE AGENCIES;
- (3) PROVIDERS WITH EXPERTISE IN DEMENTIA, GERIATRICS, END-OF-LIFE CARE, AND MENTAL HEALTH;
 - (4) LONG-TERM CARE PROVIDERS;
 - (5) MANAGED CARE ORGANIZATIONS;
 - (6) ACUTE CARE PROVIDERS;
 - (7) LAY CARE GIVERS;
 - (8) ADVOCATES FOR WAIVER-ELIGIBLE CANDIDATES; AND
 - (9) CONSUMERS.
- (P) IN DEVELOPING THE WAIVER APPLICATION UNDER THIS SECTION, THE DEPARTMENT SHALL:
- (1) DETERMINE WHETHER IT IS IN THE BEST INTEREST OF WAIVER ENROLLEES TO PROVIDE FOR A STANDARD PRESCRIPTION DRUG FORMULARY AND DRUG UTILIZATION REVIEW FOR MEDICALLY NECESSARY DRUGS FOR WAIVER AND NONWAIVER RECIPIENTS IN NURSING HOMES; AND
- (2) CONSIDER MAINTAINING THE SAME NURSING HOME PRESCRIPTION DRUG BENEFIT AND UTILIZATION REVIEW FOR ALL NURSING HOME RESIDENTS UNTIL FEDERAL IMPLEMENTATION OF THE MEDICARE PRESCRIPTION DRUG, IMPROVEMENT, AND MODERNIZATION ACT OF 2003.