

~~BY repealing and reenacting, with amendments,~~

~~Article Health General~~

~~Section 15-103(b)(4) and (21)~~

~~Annotated Code of Maryland~~

~~(2000 Replacement Volume and 2003 Supplement)~~

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That ~~the Laws of Maryland read as follows;~~ without the legislative approval of the General Assembly:

(a) the Secretary of Health and Mental Hygiene may not end the exclusion of specialty mental health services from the program requiring Medical Assistance Program recipients to enroll in managed care organizations; and

(b) the Department of Health and Mental Hygiene may not contract with a behavioral managed care organization to provide specialty mental health services.

~~Article Health General~~

~~15-103.~~

~~(a) (1) The Secretary shall administer the Maryland Medical Assistance Program.~~

~~(b) (1) As permitted by federal law or waiver, the Secretary may establish a program under which Program recipients are required to enroll in managed care organizations.~~

~~(4) (i) The Secretary may exclude specific populations or services from the program developed under paragraph (1) of this subsection.~~

~~(H) THE SECRETARY SHALL EXCLUDE SPECIALTY MENTAL HEALTH SERVICES FROM THE PROGRAM DEVELOPED UNDER PARAGRAPH (1) OF THIS SUBSECTION.~~

~~[(ii)](iii) For any populations or services excluded under this paragraph, the Secretary may authorize a managed care organization, to provide the services or provide for the population, including authorization of a separate dental managed care organization or a managed care organization to provide services to Program recipients with special needs.~~

~~(5) (i) Except for a service excluded by the Secretary under paragraph (4) of this subsection, each managed care organization shall provide all the benefits required by regulations adopted under paragraph (2) of this subsection.~~

~~(ii) For a population or service excluded by the Secretary under paragraph (4) of this subsection, the Secretary may authorize a managed care organization to provide only for that population or provide only that service.~~

~~(iii) A managed care organization may subcontract specified required services to a health care provider that is licensed or authorized to provide those services.~~