- (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.
- $\frac{\langle \mathbf{P} \rangle}{\langle \mathbf{Q} \rangle}$  THE DEPARTMENT SHALL OBTAIN LEGISLATIVE APPROVAL, PRIOR TO APPLYING TO THE CENTERS FOR MEDICARE AND MEDICAID SERVICES FOR ANY WAIVER UNDER  $\S$  1115 OR  $\S$  1915(C) OF THE FEDERAL SOCIAL SECURITY ACT THE WAIVER UNDER THIS SECTION, SUBMIT THE PROPOSED WAIVER TO THE LEGISLATIVE POLICY COMMITTEE FOR ITS REVIEW AND COMMENT.
- SECTION 2. AND BE IT FURTHER ENACTED, That, in developing the requirements for certification under § 15–141(k) of the Health General Article, as enacted by Section 1 of this Act, the Department of Health and Mental Hygiene shall study ways to provide incentives for community care organizations that are locally owned, controlled, and operated, and shall report to the Senate Finance Committee and the House Health and Government Operations Committee, in accordance with § 2–1246 of the State Government Article, on or before September 30, 2004.
- SECTION 2. 3. AND BE IT FURTHER ENACTED, That the Department of Health and Mental Hygiene and the Department of Aging shall develop a plan to assist local area agencies on aging under § 15–132(1) of the Health—General Article, as added by this Act, in recruiting staff, assisting with enrollment services, and monitoring providers, and for updating the provider system to account for differences in provider size and type. The Department shall report its findings and recommendations to the Governor and, subject to § 2–1246 of the State Government Article, to the Senate Finance Committee and the House Health and Government Operations Committee on or before December 1, 2004 shall annually report to the General Assembly beginning on December 1, 2004, in accordance with § 2–1246 of the State Government Article, on the status of the program developed under § 15–141 of the Health—General Article as enacted by this Act.