

~~C. D. Individuals who were are receiving services, including disease management services, in a specialty clinic or other setting prior to being identified for the REM program shall, at the parent's or guardian's option, be allowed to continue to receive services in that setting or, if qualified for the REM program, enter the REM program. Services provided under this provision shall be reimbursed on a fee for service basis either in accordance with the REM program, or the fee for service basis in existence prior to enactment of Sec. 15 103(b) of the Health General Article provided that the Department of Health and Mental Hygiene in consultation with the Special Needs Advisory Committee and the REM Committee Chair determines that the services are appropriate and necessary and the costs will not be excessive.~~

~~D. E. The current system of payment from Children's Medical Service (CMS) for "wrap around services" not covered by Medical Assistance for Medical Assistance recipients will be maintained until January 1, 1999. The CMS program will implement a redesign initiative on January 1, 1999. This payment may be given by grants.~~

~~This language only applies to children with special needs under the age of 18.~~

~~A. The criteria for REM eligibility shall be adjusted to include consideration of the following factors:~~

- ~~1. chronicity of the condition;~~
- ~~2. need to access multiple specialty providers;~~
- ~~3. complex medical, habilitative and rehabilitative needs;~~
- ~~4. increased need for continuity of care; and~~
- ~~5. needs that are compounded by~~