

~~(5) RECOMMEND TO THE SECRETARY A PER BENEFICIARY FEE STRUCTURE TO FUND A REGIONAL CHRONIC CARE AND PREVENTION PARTNERSHIP.~~

~~(F) THE TASK FORCE SHALL REPORT ITS FINDINGS AND RECOMMENDATIONS TO THE GOVERNOR AND, SUBJECT TO § 2-1246 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY ON OR BEFORE JUNE 1, 2009.~~

~~(G) A MEMBER OF THE TASK FORCE MAY NOT RECEIVE COMPENSATION AS A MEMBER OF THE TASK FORCE BUT IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.~~

~~13-2705.~~

~~(A) A REGIONAL CHRONIC CARE AND PREVENTION PARTNERSHIP SHALL DEVELOP, IMPLEMENT, AND ADMINISTER ITS REGION'S PLAN FOR CHRONIC CARE AND PREVENTION, INCLUDING ADMINISTRATIVE STRUCTURES FOR ENTERING INTO CONTRACTS, MANAGING FUNDS, DEVELOPING PUBLIC EDUCATION AND OUTREACH PROGRAMS, AND ARRANGING TO PROVIDE AND EVALUATE CHRONIC CARE AND PREVENTION MANAGEMENT SERVICES.~~

~~(B) A REGIONAL CHRONIC CARE AND PREVENTION PARTNERSHIP SHALL:~~

~~(1) SELECT, IN CONSULTATION WITH THE SECRETARY, THE CHRONIC CONDITIONS FOR WHICH CHRONIC CARE AND PREVENTION SERVICES WILL BE PROVIDED WITHIN THE REGION WITH CONSIDERATION GIVEN TO THE:~~

~~(I) PREVALENCE OF CHRONIC CONDITIONS IN THE REGION AND THE FACTORS THAT MAY LEAD TO THE DEVELOPMENT OF THE CONDITIONS;~~

~~(II) PREPARTNERSHIP FISCAL IMPACT TO THE STATE HEALTH CARE PROGRAMS PROVIDING CARE FOR ELIGIBLE INDIVIDUALS;~~

~~(III) AVAILABILITY OF SCIENTIFICALLY SOUND, EVIDENCE BASED INFORMATION TO MANAGE THE CARE OF A CHRONIC CONDITION; AND~~

~~(IV) PUBLIC INPUT INTO THE SELECTION PROCESS;~~