

~~(E) THE SECRETARY SHALL INCREASE AS PRACTICABLE THE NUMBER OF PARTNERSHIPS THROUGHOUT THE STATE TO EXPAND THE IMPACT OF THE PROGRAM ON A STATEWIDE BASIS.~~

~~(F) THE SECRETARY MAY ENTER INTO A CONTRACT FOR AN EVALUATION OF THE IMPACT OF THE PROGRAM ON:~~

~~(1) MEDICAID AND THE MARYLAND CHILDREN'S HEALTH PROGRAM EXPENDITURES; AND~~

~~(2) THE PREVALENCE AND SERIOUSNESS OF THE TARGETED CHRONIC CONDITIONS IN VARIOUS REGIONS OF THE STATE.~~

~~13-2707.~~

~~(A) THE SECRETARY SHALL ESTABLISH AN ADVISORY COUNCIL.~~

~~(B) THE ADVISORY COUNCIL CONSISTS OF THE MEDICAL DIRECTORS OF EACH CHRONIC CARE AND PREVENTION PARTNERSHIP.~~

~~(C) THE PURPOSE OF THE ADVISORY COUNCIL IS TO ENABLE THE MEDICAL DIRECTORS TO EXCHANGE INFORMATION REGARDING THE DEVELOPMENT OF EACH PARTNERSHIP AND THE CLINICAL, SOCIAL, AND ECONOMIC OUTCOMES OF THE PROGRAM.~~

~~(D) THE ADVISORY COUNCIL SHALL RECOMMEND TO THE SECRETARY ANY PROPOSALS FOR CHANGES TO THE PROGRAM, PROGRAM RESEARCH, AND ANY STATEWIDE INITIATIVES THAT WOULD BE BENEFICIAL TO THE CHRONIC CARE AND PREVENTION PARTNERSHIPS.~~

~~(E) (1) THE ADVISORY COUNCIL SHALL CONSIDER THE FEASIBILITY OF APPLYING THE PATIENT EMPOWERMENT AND CASE-MANAGEMENT SERVICES TO PATIENTS NOT ELIGIBLE FOR MEDICAID OR THE MARYLAND CHILDREN'S HEALTH PROGRAM.~~

~~(2) IF THE ADVISORY COUNCIL CONCLUDES THAT CHRONIC CARE PLANS WOULD BE BENEFICIAL TO PATIENTS NOT ENROLLED IN MEDICAID OR THE MARYLAND CHILDREN'S HEALTH PROGRAM, IT SHALL PROPOSE A PER ENROLLEE FEE TO BE PAID TO THE PROGRAM BY OR ON BEHALF OF A PATIENT WHO ELECTS TO ENTER INTO A CHRONIC CARE PLAN SERVING THE REGION WHERE THE PATIENT RESIDES OR RECEIVES HEALTH CARE.~~