



Service	Description	Coverage/Limitations	Prior Authorization
Acupuncture	Therapy that uses thin needles through the skin for pain management	<ul style="list-style-type: none"> - For pain management - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
Art Therapy	Therapy using art to help you recover from or cope with health problems	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
Biometric Equipment*	One (1) Digital blood pressure cuff every three (3) years; One (1) weight scale every three (3) years	<ul style="list-style-type: none"> - Covered as medically necessary for members age 21 and older. 	Prior authorization is needed.
Chiropractic Manipulative Treatment (CMT)	Manipulative treatment of the spine for pain management	<ul style="list-style-type: none"> - For pain management - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
CVS Discount Program	20% discount card on certain OTC items	3 cards per household for length of enrollment	No
Doula Services	Home visits for care before baby is born, care after baby is born, and newborn visit by doula	No limit for pregnant female members 14 to 55 years of age	Prior authorization is needed.
Equine (Horse) Therapy	Therapy using horses to help you recover from or cope with health problems	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 10 sessions per year 	Prior authorization is needed.
Hearing Benefits for Adults	Evaluation of your hearing and if you need a hearing aid; fitting for hearing aid	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 1 evaluation every 2 years - 1 hearing aid assessment every 2 years - 1 hearing aid every 2 years 	Prior authorization is needed.

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Home Delivered Meals – After Discharge from a Facility	Meals provided to members after hospital or nursing home discharge	10 home delivered meals delivered to your home, limited to 2 discharges per year for members 21 and older	Prior authorization is needed.
Home Delivered Meals -Disaster /Preparedness	Ten (10) shelf stable meals delivered prior to hurricane or other disaster	One (1) food delivery per year for members 21 and older for Comprehensive/ ABD members	No
Home Health Nurse and Aide Services	Skilled nurse or home health aide services in your home	No limit for non-pregnant members 21 and older	Prior authorization is needed.
Home Visit by a Clinical Social Worker	Visits by clinical social workers in your home or hospice setting	48 visits per year for members 21 and older	Prior authorization is needed.
Housing Assistance	For community-based members to assist with a health crisis, personal loss, rent, housing or utilities	\$250 per member per year for Comprehensive/Dual Eligible members age 18 and older	Prior authorization is needed.
Hypoallergenic Bedding	\$100 allowance for hypoallergenic bedding (sheets, mattresses covers) for members with allergic asthma	1 set of bedding for members 21 and older	Prior authorization is needed.
Massage Therapy	Massage Therapy by a chiropractor or physical therapist for pain management	<ul style="list-style-type: none"> - For pain management - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
Meal Reimbursement for medical travel	Reimbursement for meals for members and escort if they have to travel out of area for medical care (200 miles or more)	\$100 per day meal reimbursement	Prior authorization is needed.
Medically Related Home Care Services /Homemaker	Two (2) carpet cleaning per year for adults with asthma	<ul style="list-style-type: none"> - Covered as medically necessary - 2 carpet cleanings per year - For members 21 and older 	Prior authorization is needed.

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Medical Supplies for Wound Care	Special dressings for wounds	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
Newborn Circumcision	Surgery to remove skin covering the tip of penis	<ul style="list-style-type: none"> - Available when requested up to 28 days after birth - Older if medically necessary - 1 per lifetime 	Prior authorization is needed if older than 28 days.
Non-emergency Transportation - Non-Medical Purposes	Weekly social round trip transportation within county of residence for going to the bank, grocery shopping, church	<ul style="list-style-type: none"> - Weekly within the county that you live for Comprehensive/ABD members age 21 and older 	No
Nutritional Counseling	Individual and/or group counseling with nutritionist	<ul style="list-style-type: none"> - Covered as medically necessary - No limit 	Prior authorization is needed.
Occupational Therapy for adults	Evaluation and therapy that helps you do things in your daily life, like writing, feeding yourself, and using items around the house	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 1 evaluation and 1 re-evaluation per year - Up to 7 therapy treatment units per week 	Prior authorization is needed.
Outpatient Hospital Services	Unlimited outpatient hospital services	<ul style="list-style-type: none"> - Covered as medically necessary - No limit 	Prior authorization is needed.
Over-the-Counter Benefit	Over-the-counter products from CVS pharmacy	<ul style="list-style-type: none"> - \$25 limit per household per month on select OTC items 	No
Pet Therapy	Therapy using animals to help you recover from or cope with health problems	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - No limit 	Prior authorization is needed.
Physical Therapy for Adults	Evaluation and physical therapy services which include exercises, stretching, and other treatments to help	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 1 evaluation and 1 re-evaluation per year 	Prior authorization is needed.

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	your body get stronger and feel better after an injury, illness, or because of a medical condition	<ul style="list-style-type: none"> - Up to 7 therapy treatment units per week 	
Prenatal/ Postpartum Services	Additional visits during pregnancy and after delivery; breast pump	<ul style="list-style-type: none"> - Covered as medically necessary - 1 hospital grade breast pump per year for rent - 1 non-hospital grade breast pump every 2 years - Before baby is born, up to 14 prenatal visits for low risk pregnancy and 18 visits for high risk pregnancy - After baby is born, 3 visits within 90 days of delivery 	Prior authorization is needed for rental of hospital grade breast pump.
Primary Care Visits for Adults	Office, outpatient, nursing facility primary care visits	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - No limit 	No
Respiratory Therapy for Adults	Evaluation and respiratory therapy services to help you breath better	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 1 evaluation per year - 1 visit per day 	Prior authorization is needed.
Speech Therapy for Adults	Evaluation and therapy services to include tests and treatments that help you talk or swallow including evaluation and training for speech devices (AAC)	<ul style="list-style-type: none"> - Covered as medically necessary - For members 21 and older - 1 evaluation/re-evaluation per year - 1 swallow study per year - Up to 7 speech therapy units per week - 1 AAC evaluation and 1 AAC re-evaluation per year - Up to 4 AAC fittings, adjustments and trainings per year 	Prior authorization is needed.
Vaccine –Flu	Vaccine for flu	2 vaccines per year for members 21 and older	No

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Vaccine-TDaP	Vaccine for Tetanus Diphtheria Pertussis (TDaP)	1 vaccination for pregnant female members ages 14 to 55 – each pregnancy	No
Vaccine-Pneumonia	Vaccine to prevent Pneumonia	1 vaccination every 5 years for members 21 and older	No
Vaccine-Shingles	Vaccine to prevent Shingles	1 vaccination series per lifetime for members 21 and older	Prior authorization is needed for members less than 50 years of age.
Vision Services for Adults	Contact lenses and additional eye exam and glasses frames	<ul style="list-style-type: none"> - Covered as medically necessary - Members 21 and older - 6-month supply of contact lenses with prescription - 1 additional glasses frame per year - 1 eye exam per year 	Prior authorization is needed.
Waived Copayments	No copayments for certain services such as seeing the foot doctor, using a rural health clinic, using the hospital for outpatient services	No limit	Prior authorization is needed for non-participating providers.

Long Term Care Expanded Benefits

Service	Description	Coverage/Limitations	Prior Authorization
Assisted Living Facility/Adult Family Care Home-Bed Hold Days	Health plan will pay to hold your bed for 30-days when you are admitted to a hospital or nursing home.	30-day bed hold for members who live in an ALF or AFCH and are age 18 and older.	No
Assisted Living Facility Move-In Basket*	Long Term Services and Support (LTSS) members currently living in an ALF and new members transitioning into an ALF can select up to \$50 worth of essential items from a pre-approved list	One (1) lifetime benefit; \$50 worth of items for members who live in an ALF and are age 21 and older.	No
Caregiver Transportation*	For LTSS eligible caregivers who need transportation to see loved ones in an ALF.	Four (4) one-way trips monthly for caregivers age 18 and older.	No
Transitional Assistance	Assistance with move from a nursing home to the community; help with housing, furnishings, supplies and moving expenses.	\$5,000 per lifetime for members age 18 and older.	Prior authorization is needed.

*** New Benefit**