

Your Plan Benefits: Expanded Benefits

Expanded benefits are extra goods or services we provide to you, free of charge. Call Member Services to ask about getting expanded benefits.

Service	Description	Coverage/Limitations	Prior Authorization
Biometric Equipment	Digital blood pressure cuff and weight scale	One (1) digital blood pressure cuff every three (3) years; One (1) weight scale every three (3) years	No
Care grant	Up to \$150 per calendar year per child for services or supplies for educational use, social use or physical activities.	Ages 0 to 21. Up to \$150 per calendar year.	Yes
Durable Medical Equipment/Supplies	Unlimited hypoallergenic bedding; one (1) HEPA filter vacuum cleaner.	Must be diagnosed with asthma.	Yes
Doula services	Pregnancy, postpartum and newborn care and assessment provided in your home by a doula.	Ages 13 and older. No limits.	Yes
Flu/Pandemic Prevention Kit	1 Flu/Pandemic Prevention kit; 3 ply face masks – 10 piece; oral digital thermometer; hand sanitizer	Ages 18 years and older. Eligible for the first 1,000 members who have received their flu vaccine.	No
Home Delivered Meals (Disaster Preparedness/Relief)	Emergency meal kit	One (1) annually	Yes

Service	Description	Coverage/Limitations	Prior Authorizatio
Home delivered meals post inpatient discharge	Meals delivered to your home after discharge from hospital or nursing facility.	Ages 0 to 21. No limits.	Yes
Legal Guardianship	Maximum of five hundred dollars (\$500) per eligible enrollee per lifetime.	This is available to members who are in a SNF or PDN setting and parent is obtaining guardianship to protect those who are unable to care for their own well-being. Available for members aged 17 through 18.5.	Contact your care manager to determine eligibility.
Life Skills Development	For children or adolescents with development disabilities to provide life skills development that help the child or adolescent keep, learn or improve skills and functioning for daily living. These services will be provided in the home or outpatient setting.	Ages 12 to 21. Must have a diagnosed developmental disability. Up to 160 hours per calendar year.	Yes
Meal Stipend	Available for long distance medical appointment day-trips.	Up to \$25/day for member and \$25/day for escort for trips greater than 100 miles; max/fiscal year \$250.	Yes
Medically Related Home Care Services/ Homemaker	Carpet cleanings	Up to two cleanings per year. Must be diagnosed with asthma.	Yes

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Newborn circumcision	Can be provided in a hospital, office or outpatient setting.	Birth to 28 days old. 1 per lifetime if medically necessary.	No
Non-emergency transportation – non-medical purposes	Transportation provided for non-medical purposes such as social outings or family visits.	Ages 5 to 21. Three round-trips per month.	Yes
Over-the-counter benefit	Coverage for cold, cough, allergy, vitamins, supplements, ophthalmic/otic preparations, pain relievers, gastrointestinal products, first aid care, hygiene products, insect repellent, oral hygiene products and skin care.	Ages 0 to 21. Up to \$25 per household, per month.	No
Prenatal/Postpartum	<ul style="list-style-type: none"> • 14 visits for low-risk pregnancy • 18 visits for high-risk pregnancy • Breast pump, hospital grade rental • Breast pump 	<ul style="list-style-type: none"> • One per calendar year • One every 2 calendar years 	<ul style="list-style-type: none"> • No • No • Yes • No
Swimming Lessons (Drowning Prevention)	Children under 21 years old can receive swimming lessons.	Up to \$200 per year.	Yes

Service	Description	Coverage/Limitations	Prior Authorization
Transition Assistance	One-time payment of up to \$500 per youth who is transitioning out of foster care at age 18 or out of extended foster care at age 21. Funds to support moving to a new home.	Ages 18 to 21. Must be in out-of-home licensed foster care for a minimum of 6 months before transitioning out of foster care.	Yes

The plan will not charge a copayment. Also, there will be no cost sharing for all covered services. This includes expanded benefits.