

HEALTH INSURANCE BENEFITS

MEDICAID

Provided by a Managed Care Plan or Fee For Service

CO-PAYS MAY APPLY IN SOME INSTANCES
NO PREMIUMS

Inpatient Hospitalization
Emergency Care
Outpatient Care
Lab Tests and X-rays
Primary and Preventive Health Care/Education
Vision, Speech and Hearing Services
Durable Medical Equipment
Prescription Drugs
Prosthetics and Orthotics
Second Medical/Surgical Opinions
Dental Care
Diabetic Supplies and Equipment
Smoking Cessation Products
Short-term Rehabilitation**
Home Health Care (some limits apply)
Family Planning/Reproductive Health
Physicians/Nurse Practitioners/Midwives
Radiation/Chemotherapy/Hemodialysis
Mental Health/Alcohol & Substance Abuse Treatment (as medically necessary)
Over the Counter Drugs (with a written prescription)
Emergency and Non-emergency medical transportation
Hospice Care
Private Duty or Skilled Nursing Care
Personal Care aide Services
Adult Medical Day Care
Orthodontia
Medical/surgical supplies
Orthopedic Shoes

FAMILY HEALTH PLUS

Provided by a Managed Care Plan only

CO-PAYS APPLY
NO PREMIUMS

Inpatient Hospitalization
Emergency Care
Outpatient Care
Lab Tests and X-rays
Primary and Preventive Health Care/Education
Vision, Speech and Hearing Services
Durable Medical Equipment
Prescription Drugs
Prosthetics and Orthotics
Second Medical/Surgical Opinions
Dental Care provided only by Fidelis Care
Diabetic Supplies and Equipment
Smoking Cessation Products
Short-term Rehabilitation
Home Health Care (some limits apply)
Family Planning/Reproductive Health
Physicians/Nurse Practitioners/Midwives
Radiation/Chemotherapy/Hemodialysis
Mental Health/Alcohol & Substance Abuse Treatment (some limits apply)
Emergency Ambulance Transportation
Hospice Care

CHILD HEALTH PLUS

Provided by a Managed Care Plan Only

NO CO-PAYS
PREMIUMS MAY APPLY

Inpatient Hospitalization
Emergency Care
Outpatient Care
Lab Test and X-rays
Primary and Preventive Health Care/Education
Vision, Speech and Hearing Services
Durable Medical Equipment
Prescription Drugs
Prosthetics and Orthotics
Second Medical/Surgical Opinions
Dental Care
Diabetic Supplies and Equipment
Smoking Cessation Products
Short-term Rehabilitation
Home Health Care (some limits apply)
Family Planning/Reproductive Health
Physicians/Nurse Practitioners/Midwives
Radiation/Chemotherapy/Hemodialysis
Mental Health/Alcohol a& Substance Treatment (some limits apply)
Over the Counter Drugs (with a written prescription)
Non-airborne Emergency Ambulance Services
Hospice Care

MANAGED CARE PLANS AVAILABLE: EXCELLUS BLUECROSS BLUESHIELD, FIDELIS CARE AND MVP

Family Health Plus Co-Pays

➤ Brand Name Prescription Drugs	\$6.00 for each prescription and refill
➤ Generic prescription drugs	\$3.00 for each prescription and refill
➤ Clinic visits	\$5.00 per visit
➤ Physician visits	\$5.00 per visit
➤ Dental service visits (Fidelis Care Only)	\$5.00 per visit up to a total of \$25.00 per year
➤ Lab tests	\$0.50 per test
➤ Radiology services (e.g., diagnostic x-rays, Ultrasound, nuclear medicine, oncology services)	\$1.00 per x-ray
➤ Inpatient hospital stay	\$25.00 per stay
➤ Non-urgent emergency room visit	\$3.00 per visit
➤ Covered over-the-counter drugs (e.g. smoking cessation products; insulin)	\$0.50 per drug
➤ Covered medical supplies (e.g. diabetic supplies such as syringes, lancets, Test strips, enteral formula)	\$1.00 per supply

Pregnant women or individuals under age 21 will not have to pay the co-payment.

If you cannot afford the co-payment at the time of service, tell your provider. The provider must still provide services and bill you later.