



## 5. BENEFITS, SERVICES AND COPAYMENTS

KidzPartners is pleased to provide you with the following information on benefits, services and copays you have with KidzPartners, as well as what is not covered. Please call our Member Relations department anytime if you have any questions, at 1-888-888-1211 or 215-967-4540 (TTY 1-877-454-8477 or 215-849-1579).

### Copays

Children are enrolled into “free,” “low-cost” or “at-cost” CHIP based on family income and related information that you provide in your application. In the low-cost and at-cost programs, some of your KidzPartners benefits require a copayment or “copay” that you pay directly to the provider each time you get services, as described below.

#### ***All members enrolled in KidzPartners:***

There are no CHIP copays for preventive care services, including well-child visits and visits for immunizations, for members in any premium category.

#### ***Members enrolled in “free” KidzPartners:***

There are no CHIP copays for any services for any members enrolled in the free program.

#### ***Members enrolled in “low-cost” KidzPartners pay the following CHIP copays:***

- \$5 for visits to your children’s primary care physician, except for well-child visits
- \$10 for visits to specialists
- \$25 for visits to the emergency room.  
This copay is waived if your child is admitted.
- \$9 for brand name formulary drugs and \$6 for generics

The annual maximum you will pay for copays is five percent of your family income

#### ***Members enrolled in “at-cost” KidzPartners pay the following CHIP copays:***

- \$15 for visits to your children’s primary care physician, except for well-child visits
- \$25 for visits to specialists
- \$50 for visits to the emergency room.  
This copay is waived if your child is admitted.
- \$18 for brand name formulary drugs and \$10 for generics

For questions or more information on your copays, please call KidzPartners Member Relations anytime at 1-888-888-1211 or 215-967-4540 (TTY 1-877-454-8477).

## Benefits

The following chart provides an overview of your coverage with KidzPartners. Please also see “Non-

Covered Services” at the end of this section, as well as Special Needs Services (Section 7). Note: Except in an emergency, ALL services from non-participating providers require prior authorization from Health Partners.

KidzPartners Benefit	How to Obtain This Benefit
<p><b>Primary Care Services:</b> Covered for both sick visits and well-child/preventive care.</p>	<p>You select your own primary care provider (PCP) from our network of participating providers and make your own appointments.*</p>
<p><b>Ambulance/Transportation Services:</b> All modes of emergency transportation are covered. Transportation between facilities/providers is covered if medically necessary, and not solely for convenience.</p>	<p>For emergencies, call 911; for all other services, prior authorization required.</p>
<p><b>Consultations:</b> By specialists, including second opinion consultations to determine the medical necessity of elective surgery, or when a member’s family desires another opinion about medical treatment.</p>	<p>Primary care provider referral required.</p>
<p><b>Dental Services:</b> Emergency, preventive and routine dental care are covered. Also see “Dental Care” in this section. You may use any dentist listed in our provider directory.</p>	<p>You may use any dentist listed in our provider directory.* No referrals are necessary. Certain services require prior authorization. See Section 6 for information on prior authorization.</p>
<p><b>Diabetes Self-Monitoring Supplies:</b> Formulary blood glucose meters, test strips, lancet devices and lancets, and glucose control solutions for checking test strip/monitor accuracy, are covered.</p>	<p>Members must use a participating pharmacy. Prescription required. Prior authorization may be required. Copays may apply. See also “Prescription Drugs” in this table.</p>
<p><b>Disease Management Programs:</b> Disease Management Programs: Programs are available to help you manage diabetes, pediatric obesity, and asthma. Smoking cessation programs are also available for pregnant members. Covered in full.</p>	<p>Contact your primary care provider, or call our Disease Management department at 215-991-4252. For our Baby Partners program for pregnant members, please call 215-991-4182.</p>
<p><b>Drug and Alcohol Abuse – Inpatient Hospital Treatment:</b> Limited to seven days per admission. No lifetime maximum.</p>	<p>Contact CompCare at 1-877-710-8222. See “Drug and Alcohol Treatment and Mental Health Services” in Section 7 for more information about CompCare.</p>
<p><b>Drug and Alcohol Abuse – Non-Hospital Residential Treatment:</b> 90 days per year for residential treatment. Outpatient treatment visits may be exchanged on a two-to-one basis to secure additional non-hospital, residential alcohol/drug treatment days.</p>	<p>Contact CompCare at 1-877-710-8222.</p>
<p><b>Drug and Alcohol Abuse – Outpatient Treatment:</b> Limited to 90 separate sessions of outpatient or equivalent partial hospitalization visits per year. Outpatient treatment visits may be exchanged on a two-to-one basis to secure additional non-hospital, residential alcohol/drug treatment days.</p>	<p>Contact CompCare at 1-877-710-8222. \$25 specialty copay applies for outpatient visits for at-cost members only.</p>

\* To find a KidzPartners participating provider, see the KidzPartners Provider Directory or our online directory at [www.kidzpartners.com](http://www.kidzpartners.com), or call Member Relations at 1-888-888-1211 (TTY 1-877-454-8477).

<b>KidzPartners Benefit</b>	<b>How to Obtain This Benefit</b>
<b>Durable Medical Equipment:</b> Rental costs are covered for wheelchairs, or other equipment for home or school for therapeutic use, up to the total cost of purchase, or the purchase of durable medical equipment will be covered.	Provider referral/prescription is required. Prior authorization may be required.
<b>Family Planning Services:</b> Birth control pills, injectables, patches, and insertion and implantation of contraceptives, including devices, are covered.	Contact your participating primary care provider, gynecologist or family planning provider. No referral required.
<b>Fitness Program:</b> Annual membership covered in participating facilities; participation requirements apply.	See "Fitness Program Membership" in this section. No referral required.
<b>Gynecological Services:</b> Covered	Contact your participating primary care provider, gynecologist or any family planning provider. No referral required for participating providers.*
<b>Hearing:</b> Emergency, preventive and routine hearing care, including audiologist visits when referred by the PCP, are covered.	Contact your primary care provider. No copay is required for services provided by the PCP. Specialist copay applies for audiologist visits.
<b>Hearing Aids</b> - One device per ear covered every two years.	Contact your primary care provider. Prior authorization is required.
<b>Home Health Care:</b> Up to 60 visits per year. This includes nursing services; physical, speech and occupational therapies; medical and surgical supplies; oxygen and its administration; home medical equipment; and well-mother/well-baby care following release from inpatient maternity site.	Contact your primary care provider or your treating specialist. Prior authorization required.
<b>Home Health Care Visit – Maternity:</b> Members are covered for two maternity healthcare visits provided at their home. Visits include parent education, assistance and training in breast and bottle feeding, infant screening, clinical tests, and the performance of any necessary mother and baby assessments.	Contact your primary care provider or your treating specialist. Prior authorization is required.
<b>Hospice Care:</b> Inpatient and outpatient.	Contact your primary care provider. Prior authorization and Certification of Terminal Illness verifying life expectancy of less than six months required. No referral required.
<b>Hospital Services – Inpatient:</b> Up to 90 days in the hospital are covered per year for medically necessary physical and mental health care.	Prior authorization is required for all mental health admissions, and for all physical health non-emergency admissions.
<b>Hospital Services – Outpatient:</b> Medically necessary outpatient hospital services are covered.	Prior authorization is required for all outpatient surgery, and certain other services as noted elsewhere in this Benefits chart.

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<b>KidzPartners Benefit</b>	<b>How to Obtain This Benefit</b>
<b>Injections and Medications:</b> Provided in the physician office, a hospital, or freestanding ambulatory service center, including immunizations and anesthesia services when performed in connection with covered services.	No copays apply. Prior authorization may be required.
<b>Laboratory and X-ray Services:</b> Covered	PCP referral/prescription required. Prior authorization may be required.
<b>Mental Health Services – Inpatient:</b> Covered for 90 days (combined total for physical and mental health days). One inpatient hospital day may be exchanged for two partial hospitalization days.	No copays apply. Prior authorization is required. Contact CompCare at 1-877-710-8222.
<b>Mental Health Services – Outpatient:</b> Up to 50 visits per year including psychological testing; consultations; individual, and group or family therapy. Also see “Prescription Drugs” below.	Contact CompCare at 1-877-710-8222. \$25 specialty copay applies for outpatient visits for at-cost members only.
<b>Mental Health Services – Partial Hospitalization:</b> Partial hospitalization includes medical, nursing, counseling, and therapeutic services. One inpatient hospital day may be exchanged for two days of partial hospitalization.	No copays apply. Prior authorization is required. Contact CompCare at 1-877-710-8222.
<b>Newborn Care:</b> Covered for a newborn child of member for 31 days following birth.	
<b>Obstetrical Services:</b> Mothers and infants can remain in the hospital for 48 hours after a normal delivery or 96 hours after a Caesarean delivery. Treatment for complications is also covered.	No referral necessary for participating providers.* No copays apply for prenatal care.
<b>Oral Surgery:</b> Covered	Primary Care Provider referral required. Specialist copay applies. Prior authorization required when services are provided in a facility.
<b>Organ Transplants:</b> Covered for the member as recipient, when medically necessary and not experimental/investigative. Formulary immunosuppressants also covered.	Prior authorization is required. Donor transplant services covered only when the member is the transplant recipient, and when Health Partners can verify that these services are not covered by the donor’s insurance.
<b>Orthodontia:</b> Please note that the CHIP program does not provide any orthodontic benefits; the benefit described here is provided solely by Health Partners for its KidzPartners members.	\$100 lifetime maximum reimbursement following 12 months of continuous enrollment. See “Orthodontics” in this section.
<b>Outpatient Therapies:</b> Covered up to 60 visits per therapy, per year; for physical, speech, and occupational therapy. Unlimited visits for chemotherapy, radiation therapy, respiratory therapy and dialysis.	Primary care provider referral required. Prior authorization required for physical, speech, and occupational therapy

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KidzPartners Benefit	How to Obtain This Benefit
<p><b>Prescription Drugs:</b> Formulary drugs are covered. Includes self-administered injectable medications and diabetes self-monitoring supplies.</p>	<p>Members must use a participating pharmacy.* Copays: \$6 for generic/\$9 for brand for low-cost; \$10/\$18 for at-cost; maximum of 5% out-of-pocket expense includes these copays. Prior authorization required for certain medications.</p>
<p><b>Preventive Care/Well-Child Care:</b> Covered</p>	<p>Contact your primary care provider. No copays apply.</p>
<p><b>Prosthetics and Orthotics:</b> Covers the purchase of prosthetic devices and supplies, including fittings and adjustments; replacements covered only when deemed medically necessary and appropriate.</p>	<p>Contact your primary care provider, or your treating specialist. Prior authorization required.</p>
<p><b>ScriptSave:</b> Special discount card for prescription drug/discount that can be used by entire family</p>	<p>ScriptSave card will be mailed to you.</p>
<p><b>Skilled Nursing Facility Services:</b> Covered under 90-day physical and mental health inpatient benefit.</p>	<p>Contact your primary care provider. Prior authorization is required.</p>
<p><b>Smoking Cessation Services:</b> Covered.</p>	<p>Contact KidzPartners Member Relations at 1-888-888-1211.</p>
<p><b>Special Needs Unit (SNU) Services:</b> Covered.</p>	<p>Contact your primary care provider or SNU at 1-866-500-4571.</p>
<p><b>Specialist Physician Services:</b> Covered.</p>	<p>Primary care provider referral required. Prior authorization may be required.</p>
<p><b>Vision Care:</b> Preventive and routine vision care are covered. This includes the cost of exams, corrective lenses, frames, and medically necessary contacts, not to exceed two routine eye exams and two pairs of eyeglasses or contact lenses a year. Discounts available for special lens treatments.</p>	<p>Contact any KidzPartners participating vision care provider for preventive/routine vision care services. No referral required for preventive/routine vision care services obtained from a KidzPartners participating vision care provider.*</p>
<p><b>Weight Watchers®:</b> Membership is covered when program requirements are met. See "Weight Watchers Benefit" in this section for more information.</p>	<p>Members pay a \$2 weekly meeting fee. Contact KidzPartners Members Relations at 1-888-888-1211.</p>

\* To find a KidzPartners participating provider, see the KidzPartners Provider Directory or our online directory at [www.kidzpartners.com](http://www.kidzpartners.com), or call Member Relations at 1-888-888-1211 (TTY 1-877-454-8477).

## **Asthma Checkups**

If your children have or you suspect they may have asthma, make sure they are on the right medication to help prevent asthma episodes. Checkups are covered as a primary care service. Call Member Relations at 1-888-888-1211 (TTY 1-877-454-8477) for information on KidzPartners' Asthma Management program.

## **Dental Care**

Your children are covered for a broad range of routine dental services and preventive care. You can go to any of the general dentists or dental specialists listed in the Provider Directory. Just select a dentist from this list and call the office to make an appointment. Your children do not even need a referral for a dental visit.

Covered dental services include:

- Anesthesia
- Checkups (two per year)
- Periodontal services
- Cleanings (two per year)
- Root canals
- Crowns
- Sealants
- Dentures
- Dental surgical procedures
- Dental emergencies
- X-rays
- Extractions (tooth removal)
- Fillings

For more information on your children's dental benefits, please call KidzPartners Member Relations anytime at 1-888-888-1211 (TTY 1-877-454-8477).

## **Orthodontics**

After having been enrolled in KidzPartners for at least 12 months, your children are covered for up to \$100 maximum lifetime reimbursement for orthodontic care received while active with KidzPartners. Please note that this benefit is provided directly by Health Partners; the CHIP program provides no orthodontic coverage.

You are required to submit a bill or paid receipt for your children's orthodontic services. Reimbursement will be made directly to the parent or legal guardian.

You select your own orthodontist. Health Partners does not make any endorsements of or referrals to orthodontists.

You must submit a bill/receipt from your children's orthodontist to Health Partners within 180 days of the date of service on the orthodontist's bill/receipt.

Health Partners will reimburse you a one-time \$100 maximum reimbursement for covered services based on the bill/receipt amount. No other payments will be made for orthodontic care.

## **Diabetes Checkups**

If your children have or you suspect they may have diabetes, it is important they have a blood test called HbA1c, which will check the average amount of sugar in their blood over the past 2-3 months. It is also important to have a cholesterol test called an LDL. Diabetes checkups (including these tests) are covered as a primary care service. Diabetic children should also get dilated eye exams, which are covered under KidzPartners' vision benefit. Call KidzPartners Member Relations at 1-888-888-1211 (TTY 1-877-454-8477) for information on KidzPartners' Diabetes Management program.

## **Family Planning Services**

KidzPartners members can get family planning services through their PCP or any doctor or clinic of their choice including those not in KidzPartners' network. These services may include pregnancy testing, testing and treatment for sexually transmitted diseases, basic birth control supplies, and counseling. No referral is needed.

## **Fitness Program Membership**

Exercise helps children stay healthy and feel good about themselves. That's why KidzPartners offers special memberships at participating area YMCA's and other fitness centers. To qualify for a year-long membership at a participating center, members under 18 must complete six visits within the first three months. Members 18 and older must complete 12 visits during the introductory period, and have a \$2 copay for each visit.

After completing these visits, no copay is required for the rest of their one-year fitness membership period. You must sign a fitness enrollment form during your children's first visit to the fitness center. For more information, please call KidzPartners Member Relations at 1-888-888-1211 (TTY 1-877-454-8477).

## Home Health Care

If your children become sick or hurt, medical care may be available in your home. Your children's PCP will talk about this with you and, if appropriate, will then contact Health Partners to request prior authorization of these services.

## Hospitalization

If your children need to be admitted to a hospital, your KidzPartners PCP will arrange for them to go to a KidzPartners participating hospital. Their PCP will continue to follow your children's care even if they need other doctors. Hospital admissions, except for emergencies, need to be prior authorized (pre-approved) by Health Partners.

## Maternity Care

Prenatal care is the care members need when they are pregnant, for the health of both the mother and child. When you find out that you are pregnant, call your OB doctor right away. If you do not have an OB doctor, just call the Member Relations department or your PCP to pick one. You do not need a referral from your PCP for prenatal care. It is important to your health and your baby's health to visit your OB doctor in the first three months of your pregnancy.

If you are newly enrolled in KidzPartners, schedule an appointment to see your OB doctor immediately. During these visits, your OB doctor will do important things to keep you and your baby healthy, like asking you questions about your medical history, giving you a physical exam and vitamins, and giving you tests to make sure you have no conditions like diabetes and high blood pressure.

KidzPartners covers all the OB provider visits you need before your baby is born, with no copays. Regular checkups after the birth are also covered. It is important that you have checkups after you deliver your baby. You should see your doctor within three to six weeks after you have the baby or if you have any problems. If your OB provider ever leaves KidzPartners, or if you are a new enrollee and are seeing an OB doctor who is not in KidzPartners' network, you have the right to request to continue seeing this doctor for remaining prenatal care visits and follow-up care after the birth.

When you are pregnant, the covered care includes:

- Vitamins
- Hospital stays
- Hospital delivery and nursery
- Treatment for any maternity-related complications
- Smoking cessation
- Tests recommended or conducted by your OB doctor

Under our Smiling Stork program, KidzPartners provides all pregnant moms with important information about prenatal dental care. Moms who take good care of their teeth have healthier babies!

In addition, KidzPartners offers two home visits to every new mom and their newborn member. Visits are usually scheduled within the first two weeks and the second two weeks following hospital discharge. Staying with KidzPartners throughout your pregnancy will help assure that you and your baby receive all necessary care.

KidzPartners offers its pregnant members additional assistance through our Baby Partners program. This includes talking to a Case Manager who can assist with questions you may have about your pregnancy and a Welcome Packet with important information on how to stay healthy while you are pregnant. For more information on our Baby Partners program, contact Member Relations at 1-888-888-1211 or the Baby Partners line at 215-991-4182 (TTY 1-877-454-8477).

CHIP coverage will be extended to babies born to CHIP members for 31 days. It is important to apply for Medical Assistance or CHIP right away to provide continued coverage for the baby. Only one application needs to be completed to apply for both programs.

## Member Education Classes

KidzPartners offers educational programs in many communities. Classes include ones to help your children quit smoking, have a healthy baby, and become a better parent. KidzPartners also offers education to help members deal with special health problems, like asthma. Watch for information about these and other education sessions in your KidzPartners member newsletter. You can also call the Member Relations department for details about current classes.

## Outpatient Services

Outpatient services, such as x-rays and laboratory tests, are also covered. Your KidzPartners PCP will arrange for these services at a KidzPartners participating hospital or a participating outpatient center.

## Prescriptions

If your children need medicine, their PCP or specialist will write a prescription. Simply take it to one of the nearly 900 area pharmacies (drug stores) that fill KidzPartners prescriptions. Your prescription will be filled if your children are active KidzPartners members and the prescribed drug is on our formulary. Depending on your CHIP category, you may be charged a copayment for your prescription.

Sometimes you may be charged a copayment for a prescription by mistake. If you think you should not have to pay a copayment, please contact Member Relations from the pharmacy for assistance. If the pharmacist tries to charge you the wrong amount for a prescription, please ask him/her to contact Health Partners.

If you need help finding a pharmacy, or would like a complete list of participating pharmacies, call our Member Relations department anytime at 1-888-888-1211 (TTY 1-877-454-8477). You can also check the KidzPartners Provider Directory, or visit us online at [www.kidzpartners.com](http://www.kidzpartners.com), to find participating pharmacies.

## Formulary

KidzPartners has a formulary. A formulary is a list of medicines that a health plan approves for use. Your children's doctor uses our formulary when choosing medicines for them. The formulary contains two kinds of drugs: brand name drugs and generic drugs. Generic drugs contain the same active ingredients as brand name drugs. Since they work the same way as the brand name drugs, you can feel sure that these drugs are high quality and safe for you to take. The formulary also includes certain over-the-counter (non-prescription) drugs that doctors frequently recommend for children. If the medicine your children's doctor wants to use is not part of the formulary, he or she can ask that Health Partners approve the drug for you through the medical exception process. Your doctor will need to send a Letter Of Medical Necessity (LOMN) to Health Partners' Pharmacy department. This Letter Of Medical Necessity must explain why your children need the medicine and why formulary alternatives cannot be used, when applicable. Health

Partners will review your doctor's request and make a decision within 24 hours of receiving the request.

If your children's doctor makes his/her request for Health Partners' approval after you have already taken the prescription to the pharmacy, Health Partners, while reviewing the request, will in most cases cover a 5-day supply of the medicine if your children have not already been taking the medicine, and a 15-day supply if they have already been taking the medication.

We will let you and the doctor know whether we will approve the medicine for you. If we deny your children's doctor's request, you have the right to file a complaint or grievance. Since new drugs and treatments are put into use all the time, Health Partners will make changes to the KidzPartners formulary as needed.

If you would like a copy of the KidzPartners formulary, please call our Member Relations department at 1-888-888-1211 (TTY 1-877-454-8477) or visit our website at [www.kidzpartners.com](http://www.kidzpartners.com).

## Vision Care

KidzPartners covers routine vision exams. You do not need a referral from your PCP for routine vision exams when your children go to a KidzPartners participating vision provider. (Treatment of other eye problems may be covered as a medical benefit. Your children's PCP can refer you to an eye specialist if necessary.)

Your children's vision benefit includes two annual vision exams, and two pairs of eyeglasses or two pairs of prescription contact lenses per year. Additional replacement eyeglasses can be authorized if medically necessary.

When your children need a vision exam, just check your KidzPartners Provider Directory or call Member Relations at 1-888-888-1211 (TTY 1-877-454-8477) for help finding a convenient vision care provider. When you call to make an appointment, be sure to tell the office your children are members of KidzPartners. Remember to bring your children's membership ID cards with you to the appointment.

If your children need eyeglasses, the eye doctor will give you a prescription. Sometimes your eye doctor can fill your eyeglass prescription right in the same office. If not, or if you prefer, take the prescription to a KidzPartners participating eyewear center. Remember to bring your children's membership cards, too.

Your children can select from a wide variety of fashionable eyeglass frames. Coverage includes:

- Choice of metal or plastic frames
- Choice of plastic or glass lenses
- Oversized lenses
- Fashion and gradient tinting of plastic lenses
- One year breakage warranty on all plan glasses
- If your children prefer to wear contact lenses instead of eyeglasses, KidzPartners' vision benefit will cover contact lenses instead.

If you choose a frame not included in the KidzPartners selection, your children's vision benefit will cover part of the price.

## Weight Watchers® Benefit

When children are overweight, those extra pounds can contribute to heart disease, high blood pressure and diabetes. And they can also cause problems with their confidence and self image. That's why KidzPartners wants to help them with weight loss through Weight Watchers of Philadelphia, Inc.

You pay only a \$2 weekly meeting fee when your children enroll in the KidzPartners Enhanced Benefit Weight Watchers Program and meet program requirements. To qualify, they must (1) attend 10 consecutive weekly meetings, and (2) lose at least one pound a month or meet and stay within two pounds of their Weight Watchers goal during those 10 weeks. If your children continue to meet the program requirements, their benefit will continue for successive 10-week periods. Due to Weight Watchers requirements, participation is limited to members 10 and older. For additional information, about the program, call KidzPartners Member Relations anytime at 1-888-888-1211 (TTY 1-877-454-8477).

## Well-Child Visits

You can make appointments with your children's PCP for well-child visits designed to keep them healthy. The primary and preventive care services children should have during these visits include:

- Regular checkups: From the time they are born, it is very important for your children to visit their PCP regularly for well-child checkups, including routine blood pressure screening. Babies need checkups at 1, 2, 4, 6, 9, 12, 15 and 18 months; children need annual checkups starting at age 2. In addition to providing a comprehensive physical exam, your children's PCP will arrange for any needed lab or other diagnostic testing. These visits help assure that your children stay healthy.
- Shots/Immunizations: Children should have many important shots before age two in order for the shots to have the most effect. Children should also continue to have shots, including boosters, as necessary. Whenever your children see their PCP, be sure to check that their shots are up to date.
- Health education: Your children's PCP will provide information and advice on important health issues, including prevention/cessation of all types of tobacco use, and healthy eating habits.
- Developmental screening: Checkups by your children's PCP will include screenings to check that your children's physical and learning development are on track.
- Allergy diagnosis and treatment: For children exhibiting symptoms of possible allergies, preventive care includes diagnosis and treatment.
- BMI: Ask your children's doctor about their Body Mass Index (BMI). This may help you determine whether your children are at risk for obesity.
- Young women's health screens: As your daughters become young women, routine women's health care should include checkups, Pap tests and breast exams. Check with your children's PCP for more information. Members may also visit a KidzPartners participating OB/GYN provider for these services, with no referral needed.

## Non-Covered Services

There are some healthcare services that are not covered by KidzPartners. Except for certain “extra” benefits offered by KidzPartners, KidzPartners will not cover healthcare services that are not included in the Pennsylvania Children’s Health Insurance Program..

### ***Services and situations not covered by KidzPartners include the following:***

- Services that are not medically necessary
- Administrative costs, such a charges for completing health forms or for missed appointments
- Alternative medicine, such as acupuncture, massage therapy and yoga
- Any service that is not provided or ordered by your KidzPartners PCP or specialist, except for emergency, mental health and substance abuse, and family planning services
- Consumable supplies
- Cosmetic surgery such as face lifts, tummy tucks, nose jobs or any surgery intended solely to improve appearance; only surgery considered to be reconstructive will be considered for authorization
- Dental bridges, unless required as the result of an injury
- Dentures, except if needed as a result of surgery, disease or trauma
- Experimental and investigational procedures, equipment, treatment, drugs and devices, including organ transplants
- Food supplements
- Home modifications
- Infertility services
- Items for comfort or convenience, such as air conditioners and exercise equipment
- Mental retardation services
- Non-formulary drugs, unless prior authorized by Health Partners
- Non-prescription eyeglasses or contact lenses
- Organ donation to non-members
- Orthodontics, other than as previously described in this section.
- Over-the-counter drugs or medications, that is, medications purchased without a prescription

- Paternity testing
- Physical exams performed primarily to meet third-party requirements, such as for school, camp, sports participation, or a driver’s license
- Podiatry
- Respite care
- Services offered or covered by other programs, such as Medicare, Worker’s Compensation, or Veterans Administration
- Services provided by non-participating providers, excluding emergencies
- Services provided outside the United States and its territories, with limited exceptions in Canada, Mexico and U.S. territorial waters
- Services requiring prior authorization if this authorization is not obtained
- Services requiring a referral if this referral is not obtained in advance
- Sterilizations
- Temporomandibular joint syndrome (TMJ) treatment
- Transportation provided for member convenience
- Weight reduction surgery

No health plan covers everything. **This managed care plan may not cover all your health care expenses. If you are not sure if a particular service is covered by KidzPartners, it is important to check with your PCP or KidzPartners Member Relations at 1-888-888-1211 or 215-849-9600 (TTY 1-877-454-8477).**