

Healthcare Provider Resource Guide – Regions 1 through 11

Humana Healthy Horizons in Florida provider website

Your Humana Healthy Horizons® in Florida provider website has a variety of resources to help your Humana Healthy Horizons-covered patients achieve their health and wellness goals. Content includes:

- Provider manual
- Managed Medical Assistance (MMA) Physician Incentive Program (MPIP)
- Telemedicine information
- Case management education materials and forms
- Quality resources
- Medicaid provider updates
- Training and other important materials

We encourage you to visit [Humana.com/HealthyFL](https://www.humana.com/HealthyFL) frequently for updates.

Making It Easier

Humana's Making It Easier series is a collection of narrated videos about Humana's claims payment policies and processes. These brief presentations include downloadable tip sheets and guides. Visit [Humana.com/MakingItEasier](https://www.humana.com/MakingItEasier) today. If you prefer, you may access Making It Easier through Availity Essentials™ in the Humana Payer Space under the Resources tab.

Availity Essentials

Healthcare providers who want to work with Humana online can register at no cost through Availity Essentials. This secure multi-payer portal allows you to interact with Humana and other participating payers without learning multiple systems or remembering separate payer user IDs or passwords. Many Humana-specific tools are accessible via Availity Essentials.

To find out more, call **800-282-4548** or visit [Availity.com](https://www.availity.com). Availity Essentials allows you to:

- Check eligibility and benefits
- Submit referrals and authorizations
- Check claims status
- Review potential code edits
- View remittance advice
- Submit claims electronically
- Respond to records requests (medical records management)

Humana Healthy Horizons® in Florida

Humana Healthy Horizons in Florida is a Medicaid product of Humana Medical Plan Inc.

Get paid faster and have your Humana claims payments deposited automatically with electronic funds transfer (EFT) and electronic remittance advice (ERA). Visit [Humana.com/EpaymentInfo](https://www.humana.com/epaymentinfo) for more information on EFT and ERA.

For training on these self-service tools, visit [Humana.com/ProviderSelfService](https://www.humana.com/provider-self-service) and look under “Attend an educational webinar.”

Claims and payments

Please visit our claims and payment resources at [Humana.com/EpaymentInfo](https://www.humana.com/epaymentinfo) to obtain specific information regarding:

- Claims and encounter submission
- Claims payment inquiries
- Claims payment integrity and disputes
- Claims edits
- Preauthorizations and referrals
- Electronic payment options

Medicaid preauthorization list

Humana Healthy Horizons uses preauthorization for certain services to facilitate care coordination and maximize patient benefits. The Florida Medicaid Preauthorization and Notification List does not affect preauthorizations or notifications for Medicare or commercial lines of business. To determine if preauthorization is required to treat a patient with Humana Healthy Horizons coverage, check the Florida Medicaid Preauthorization and Notification List at [Humana.com/PAL](https://www.humana.com/pal).

Frequent contact information

Important contacts	Phone number	Hours of operation
Member and provider services	800-477-6931	Monday through Friday, 8 a.m. to 8 p.m.
TTY	711	
Case management referral: Humana Health Services (includes obstetrics)	800-322-2758	Monday through Friday, 8 a.m. to 6 p.m.
Medical prior authorizations (precertification unit)	800-523-0023	Monday through Friday, 8 a.m. to 6 p.m.
Pharmacy	800-555-2546	Monday through Friday, 8 a.m. to 6 p.m.
Claims	800-477-6931	Monday through Friday, 8 a.m. to 6 p.m.
Availity Essentials	800-282-4548	

Agency for Health Care Administration field offices	Phone number
Regions 1 and 2	850-412-4540
Region 3	386-462-6201
Region 4	904-798-4201
Regions 5 and 6	727-552-2000
Region 7	407-420-2502
Region 8	239-335-1315
Regions 9 and 10	561-381-5840
Region 11	305-593-3100
Florida Agency for Health Care Administration	850-412-4000

Fraud, waste and abuse reporting

Humana	800-614-4126
Agency for Health Care Administration	888-419-3456
Florida Attorney General	866-966-7226

Important fax numbers—pharmacy	Fax number	Phone number
Medication prior authorizations (step therapy, quantity limits and medication exceptions for medication supplied by a pharmacy and billed through the pharmacy) forms available at Humana.com/PA .	877-486-2621	800-555-2546

Important addresses

Humana department	Address
Provider correspondence	Humana, Attn: Provider Correspondence P.O. Box 14601 Lexington, KY 40521-4601
Provider complaints	Humana, Attn: Provider Complaints P.O. Box 14601 Lexington, KY 40521-4601
Member grievances and appeals	Humana Health Plans P.O. Box 14546 Lexington, KY 40512-4546

Humana department	Address
Claims	Humana Claims Office P.O. Box 14601 Lexington, KY 40512-4601
Quality improvement program	Humana Quality Management Department 321 W. Main St., WFP 20 Louisville, KY 40202
Provider demographic changes	Contact Humana Provider Customer Service or your local provider relations representative

Clearinghouse information—Electronic Data Interchange

The following are some of the many clearinghouses offering services to healthcare providers. Availity Essentials is Humana’s preferred clearinghouse and charges no service fees when submitting Humana electronic claims. Some clearinghouses and vendors charge a service fee. Contact the clearinghouse for more information.

Clearinghouse vendor name	Website
Availity	Availity.com
Change Healthcare	Changehealthcare.com
TriZetto®	TrizettoProvider.com
SSI Group	TheSSIGroup.com

Humana payer ID numbers	
Fee-for-service claims	61101
Encounter claims	61102

Other network information

Required networks/vendor name	Applicable regions	Phone number
Acupuncture (adults only)		
Tivity	All regions	866-430-8647
Behavioral health		
Access Behavioral Health (ABH)	Regions 1 and 2	866-477-6725
Carelon Behavioral Health	<ul style="list-style-type: none"> Covered behavioral health services—regions 3 through 11 Healthy Behaviors—all regions 	844-265-7590

Required networks/vendor name	Applicable regions	Phone number
Chiropractic		
Florida Chiropractic Institute	Regions 1 through 8	727-544-7878
Doctors Professional Services\ Consultants (DPSC)	Region 9 (Indian River, Martin, Okeechobee and St. Lucie counties only) 15 years and older	386-615-0801
Tivity	Regions 9 (Palm Beach County only), 10 and 11	866-430-8647
Dermatology		
Dermatology Network Solutions	(Opt-in network) Broward and Miami-Dade counties	305-667-8787
Durable medical equipment (DME)/home health and IV home infusion		
One Homecare	Regions 9, 10 and 11	855-441-6900
Hearing services		
HearUSA	All regions	855-270-1585
Lab services		
Labcorp (Labcorp.com)	All regions	800-845-6167
Quest Diagnostics (QuestDiagnostics.com)	All regions	888-277-8772
Massage therapy—adult (referral required)		
Tivity	All regions	866-430-8647
Non-emergency transportation		
ModivCare	All regions	866-779-0565
Nutritional counseling		
Independent Living Systems – Humana Nutrition Department	All regions	844-212-7523
Orthopedic		
Orthopedix Network	(Opt-in network) Broward and Miami-Dade counties	844-222-4545

Required networks/vendor name	Applicable regions	Phone number
Routine vision services		
iCare Health Solutions	All regions	855-373-7627
Medical/surgical eye care		
Premier Eye Care	Regions 1 through 8 and Treasure Coast (Excludes Palm Beach County)	800-738-1889
Pharmacy		
Over the counter (OTC)— CenterWell Pharmacy®	All regions	800-526-1490
Pharmacy services limited to in-network providers	All regions	<p>Pharmacy locator for network pharmacies: Humana.com/finder/pharmacy/ Please look for the “Specialty Pharmacy” icon to ensure the pharmacy provides this service.</p>  <p>PrescribeIT: 800-526-1490</p>
Podiatry services		
iCare Services - Coordinated Medical Services	Broward, Miami-Dade, Palm Beach counties	877-253-8734 Select option #1 then option #2
Post-discharge meals		
Independent Living Systems – Humana WellDine Meals Line	All regions	866-966-3257
Therapy services (Occupational/Physical/Speech) (members ages 20 and younger only)		
Health Network One (HN1)	Regions 6 (Pediatric members birth to 20 only), Regions 10 and 11 (birth to 99)	www.mytnfl.com 888-550-8800

Compliance training

Humana supports physicians and other healthcare providers caring for Medicaid patients by requiring compliance training to help them meet state and federal requirements. The training includes modules on:

- Humana Medicaid Provider Orientation
- Health, Safety and Welfare
- Cultural Competency
- Compliance and Fraud, Waste and Abuse

More information is available at [Humana.com/HealthyFL](https://www.humana.com/HealthyFL)—by choosing the “Managed Medical Assistance (MMA)

Provider Training Materials” tab—or at [Humana.com/ProviderCompliance](https://www.humana.com/ProviderCompliance).

Florida Medicaid provider enrollment requirements and resources

To review the enrollment requirements and how to maintain Florida Medicaid provider, physician and other healthcare professional enrollment, please refer to [Florida Medicaid Provider Enrollment Policy 59G-1.060](#).

1. This rule applies to all individuals, groups and entities seeking to enroll, renew or maintain enrollment as authorized providers for the Florida Medicaid program.
2. All providers must be in compliance with the [Florida Medicaid Provider Enrollment Policy](#) provisions. Visit this website to see the rule history, along with recent notices and rule reference material.

Entities that bill Humana for Medicaid-compensable services provided to recipients by all Medicaid provider types must be active and enrolled as Medicaid providers or possess “limited enrollment status.” To meet Agency for Health Care Administration (AHCA) requirements, Humana pays only those claims and/or encounters submitted by physicians and healthcare providers with valid Medicaid enrollment. Physicians and other healthcare professionals can verify their enrollment on the AHCA website via the [Provider Master List](#).

For further information, please visit the [AHCA provider enrollment page](#).

Member card samples

Humana Healthy Horizons. in Florida

A Medicaid product of Humana Medical Plan, Inc.

Medical Plan

MEMBER NAME

Member ID: HXXXXXXXXX

Medicaid ID#: XXXXXXXX Group #: XXXXXXXX
Date of Birth: XX/XX/XX RxBIN: 610649
Effective Date: XX/XX/XX RxPCN: 03190000

PCP Name: XXXXXXXXX
PCP Phone: (XXX) XXX-XXXX
Primary Care Address: XXXXXXXXXXXXX

Member/Provider Service: 1-800-477-6931
Member Behavioral Health Inquiries: 1-888-778-4651
Pharmacist Rx Inquiries: 1-800-865-8715
Provider Prior Authorization: 1-800-523-0023
Dental Benefit Inquiries: 1-877-711-3662

Please visit us at Humana.com/HealthyFlorida

For online provider services, go to Availity.com

Please mail all claims to:

Humana Medical
P.O. Box 14601
Lexington, KY 40512-4601

Humana Healthy Horizons. in Florida

Un producto de Medicaid de Humana Medical Plan, Inc.

Medical Plan

MEMBER NAME

Id. del afiliado: HXXXXXXXXX

Id. de Medicaid: XXXXXXXX N.º de grupo: XXXXXXXX
Fecha de nacimiento: XX/XX/XX RxBIN: 610649
Fecha de entrada en vigor: XX/XX/XX RxPCN: 03190000

Nombre del PCP: XXXXXXXXX
No. de teléfono del PCP: (XXX) XXX-XXXX
Dirección de atención primaria: XXXXXXXXXXXXX

Servicio para afiliados/proveedores: 1-800-477-6931
Consultas sobre salud del comportamiento del afiliado: 1-888-778-4651
Preguntas sobre recetas para farmacéuticos: 1-800-865-8715
Autorización previa del proveedor: 1-800-523-0023
Consultas sobre beneficios dentales: 1-877-711-3662

Visitenos en Humana.com/HealthyFlorida

Para servicios para proveedores en línea, visite Availity.com

Envíe todas las reclamaciones por correo postal a:

Humana Medical
P.O. Box 14601
Lexington, KY 40512-4601

Humana Healthy Horizons. in Florida

A Medicaid product of Humana Medical Plan, Inc.

Long-Term Care Plan

MEMBER NAME

Member ID: HXXXXXXXXX

Medicaid ID: XXXXXXXXX
Group #: XXXXXXXX

Member Long-Term Care Inquiries: 1-888-998-7732
Provider Long-Term Care Inquiries: 1-888-998-7735

Please visit us at Humana.com/HealthyFlorida

For online provider services, go to Availity.com

For Participating and Non-Participating Providers Send Claims to:

Humana Long-Term Care
P.O. Box 14732
Lexington, KY 40512-4732

Humana Healthy Horizons. in Florida

Un producto de Medicaid de Humana Medical Plan, Inc.

Long-Term Care Plan

MEMBER NAME

Id. del afiliado: HXXXXXXXXX

Id. de Medicaid: XXXXXXXX
N.º de grupo: XXXXXXXX

Preguntas del afiliado sobre cuidado a largo plazo: 1-888-998-7732
Preguntas del proveedor sobre cuidado a largo plazo: 1-888-998-7735

Visite Humana.com/HealthyFlorida

Acuda a Availity.com para servicios de proveedores en línea

Los Proveedores participantes y no participantes enviar las reclamaciones a:

Humana Long Term Care
P.O. Box 14732
Lexington, KY 40512-4732

Humana Healthy Horizons in Florida

A Medicaid product of Humana Medical Plan, Inc.

Comprehensive Plan

MEMBER NAME

Member ID: HXXXXXXXXX

Medicaid ID#: XXXXXXXX Group #: XXXXXXXX
 Date of Birth: XX/XX/XX RxBIN: 610649
 Effective Date: XX/XX/XX RxPCN: 03190000

PCP Name: XXXXXXXXX
 PCP Phone: (XXX) XXX-XXXX
 Primary Care Address: XXXXXXXXXXXXX

Member/Provider Service: 1-888-998-7732
 Member Behavioral Health Inquiries: 1-888-778-4651
 Pharmacist Rx Inquiries: 1-800-865-8715
 Provider Prior Authorization: 1-800-523-0023
 Provider Long-Term Care Inquiries: 1-888-998-7735
 Dental Benefit Inquiries: 1-877-711-3662

Please visit us at Humana.com/HealthyFlorida

For online provider services, go to Availity.com

Please mail all claims to:

Managed Medical Assistance	Long-Term Care
Humana Medical	Humana Long Term Care
P.O. Box 14601	P.O. Box 14732
Lexington, KY 40512-4601	Lexington, KY 40512-4732

Humana Healthy Horizons in Florida

Un producto de Medicaid de Humana Medical Plan, Inc.

Comprehensive Plan

MEMBER NAME

Id. del afiliado: HXXXXXXXXX

Id. de Medicaid: XXXXXXXX N.º de grupo: XXXXXXXX
 Fecha de nacimiento: XX/XX/XX RxBIN: 610649
 Fecha de entrada en vigor: XX/XX/XX RxPCN: 03190000

Nombre del PCP: XXXXXXXXX
 No. de teléfono del PCP: (XXX) XXX-XXXX
 Dirección de atención primaria: XXXXXXXXXXXXX

Servicio para afiliados/proveedores: 1-888-998-7732
 Consultas sobre salud del comportamiento del afiliado: 1-888-778-4651
 Preguntas sobre recetas para farmacéuticos: 1-800-865-8715
 Autorización previa del proveedor: 1-800-523-0023
 Consultas sobre cuidado a largo plazo de proveedores: 1-888-998-7735
 Consultas sobre beneficios dentales: 1-877-711-3662

Visitenos en Humana.com/HealthyFlorida

Para servicios para proveedores en línea, visite Availity.com

Envíe todas las reclamaciones por correo postal a:

Servicios de asistencia médica administrada	Long Term Care
Humana Medical	Humana Long Term Care
P.O. Box 14601	P.O. Box 14732
Lexington, KY 40512-4601	Lexington, KY 40512-4732

Note: These sample IDs comply with state guidelines and are subject to change without notice.

Humana Healthy Horizons in Florida expanded benefits

Expanded benefit description	Medical plan	Age limit	Service limit
Acupuncture services	MMA	21 and older	Unlimited visits for pain management
Assisted living facility bed hold	Long-term care (LTC)	18 and older	Bed hold for 30 days: <ul style="list-style-type: none"> Member must intend to return to the Adult Living Facility (ALF)/Adult Family Care Home (AFCH) Member must maintain room and board and share of cost payments while away Member must live in the ALF/AFCH for at least 30 days between each episode The ALF/AFCH must inform the plan within 24 hours of the member leaving to be eligible for this expanded benefit Prior authorization required Care manager approval required

Expanded benefit description	Medical plan	Age limit	Service limit
Assisted living facility move-in basket	LTC	21 and older	<p>Get up to \$50 worth of items once per lifetime</p> <p>A move-in basket is available to members 21 and older who:</p> <ul style="list-style-type: none"> • Live in an assisted living facility • Transition/move into an assisted living facility <p>Members can pick between 2 baskets:</p> <ul style="list-style-type: none"> • Basket 1: An insulated tumbler, rainbow medication tray and plush Sherpa home throw blanket inside a clear casual tote bag • Basket 2: A bottle holder, green carabineer, copper vacuum insulated bottle, Arctic Zone thermal copper mug and a domino set inside a black tote bag <p>Members should inform their care manager of their basket choice</p>

Behavioral health			
Assessment services	MMA	21 and older	Unlimited
Computerized cognitive behavioral therapy	MMA	21 and older	Unlimited
Day services/day treatment	MMA	21 and older	Unlimited
Group therapy	MMA	21 and older	Unlimited
Home visits by a clinical social worker	MMA	21 and older	Unlimited
Individual therapy sessions to caregivers	LTC	18 and older	Unlimited
Individual/family therapy	MMA	21 and older	Unlimited
Intensive outpatient treatment	MMA	21 and older	Unlimited
Medical services: <ul style="list-style-type: none"> • Drug screening • Medication management • Verbal interaction 	MMA	21 and older	Unlimited
Medication assisted treatment	MMA	21 and older	Unlimited

Expanded benefit description	Medical plan	Age limit	Service limit
Behavioral health			
Psychosocial rehabilitation	MMA	21 and older	Unlimited
Screening services	MMA	21 and older	Unlimited
Substance-use treatment or detox services	MMA	21 and older	Unlimited
Targeted case management	MMA	21 and older	Unlimited
Therapeutic behavioral on-site services	MMA	21 and older	Unlimited
Cellular phone services	All	All	<p>Members will receive:</p> <ul style="list-style-type: none"> • 1 cell phone per household • 1 charger • 1 set of instructions • 350 voice minutes per month • 4.5 GB data per month • Unlimited text messages per month • Training for members and caregivers during the initial case manager orientation visit <p>Please note:</p> <ul style="list-style-type: none"> • Free calls to Humana Member Services for health plan assistance and 911 for emergencies (even if member runs out of free talk time); members must make at least 1 phone call or send 1 text message every month to keep the benefit • Benefits are subject to change by the Federal Communications Commission under the Lifeline program <p>Please note: Members younger than 18 will need a parent/guardian to sign up.</p>
Chiropractic services	MMA	21 and older	Unlimited visits for pain management

Expanded benefit description	Medical plan	Age limit	Service limit
Durable medical equipment	MMA	21 and older	<ul style="list-style-type: none"> • CPAP machines and oxygen, unlimited • Glucose pods, unlimited • Glucose monitoring supplies, unlimited May need prior authorization or care manager approval
Durable medical equipment	All	21 and older	<ul style="list-style-type: none"> • Members under care management for congestive heart failure can get 1 weight scale every 3 years • Members under care management for hypertension or pre-eclampsia can get 1 digital blood pressure cuff every 3 years Care manager approval required
Doula services	MMA	All ages	Prenatal visits, birth coaching assistance during vaginal delivery and postpartum visits
Financial literacy	MMA	21 and older	<ul style="list-style-type: none"> • Up to 6 life coaching sessions for money management/budgeting • Access to financial vendor for personal financial coaching, investment education, credit counseling, tax consultation and a 25% discount on tax preparation
Go365® Wellness for Pediatrics	MMA	0-18	Access to the pediatric wellness program through Go365
Hearing services	All	21 and older	<ul style="list-style-type: none"> • 1 hearing aid assessment, fitting, check and evaluation every 2 years • 1 in-ear monaural hearing aid per ear annually • 1 hearing aid, all other types, per ear every 2 years

Expanded benefit description	Medical plan	Age limit	Service limit
Housing assistance	MMA	21 and older	<p>\$500 allowance, per household, per lifetime for any combination of services below, as authorized by care manager:</p> <ul style="list-style-type: none"> • Apartment rent or mortgage payment (late payment notice required) • Utility payment for electric, water, gas or internet (late payment notice required) • Trailer park and lot rent if this is member's permanent residence (late payment notice required) • Moving expenses via licensed moving company when transitioning from a public housing authority <p>Care manager must approve, and member must not live in a residential facility</p>
Healthy living benefit	LTC	21 and older	<p>Choice of 2 healthy lifestyle aids, once per lifetime:</p> <ul style="list-style-type: none"> • Digital scale • Home blood pressure cuff • Peak flow meter • Reachers/grabbers • Lumbar pillow • Personal fan • Clip on lamp • Walker bag • 2 face masks
Legal guardianship	All	17 and older	<p>Up to \$500 per lifetime for members 17 and older in a skilled nursing facility or private duty nursing setting, and their parent is obtaining guardianship to protect individuals unable to care for their own well-being.</p> <p>Care manager approval required.</p>
Massage therapy	MMA	21 and older	<ul style="list-style-type: none"> • Unlimited visits for pain management • Referral required but it does not have to be from a primary care provider
Meals—day trip meal reimbursement/ allowance	All	21 and older	<p>\$200 per day, up to \$1,000 per year for trips greater than 100 miles</p>

Expanded benefit description	Medical plan	Age limit	Service limit
Meals—disaster preparedness/relief	MMA	All	1 box of 10 shelf-stable meals prior to a hurricane or other disaster (twice annually)
Meals—home delivered	MMA	21 and older	10 meals per year, as authorized
Meals—post discharge	MMA	All	<ul style="list-style-type: none"> • 10 meals delivered to member’s home after hospital discharge. No limit on the number of discharges • Care manager approval required
Newborn circumcisions	MMA	All	1 per lifetime for males
Nursing facility-to-community setting transition assistance	LTC	18 and older	<p>\$5,000 per lifetime to help a member move, for members who are:</p> <ul style="list-style-type: none"> • Moving out of a nursing facility into their own home • Paying their own living costs
Nutritional counseling	MMA	21 and older	<ul style="list-style-type: none"> • Unlimited necessary nutritional counseling with providers • May need prior authorization or primary care provider referral
Occupational therapy	MMA	21 and older	<ul style="list-style-type: none"> • 1 evaluation/re-evaluation per year • Up to 7 therapy treatments per week • No prior authorization needed for initial assessment • Prior authorization required for ongoing treatment
Outpatient hospital services	All	21 and older	The \$1,500 fiscal year dollar limit for non-emergency outpatient services is waived
Pharmacy OTC allowance	All	All	<ul style="list-style-type: none"> • \$25 per household per month to spend on an approved list of products • Amounts not used do not roll over
Physical therapy	MMA	21 and older	<ul style="list-style-type: none"> • 1 evaluation/re-evaluation per year • Up to 7 therapy treatments per week • No prior authorization needed for initial assessment • Prior authorization required for ongoing treatment

Expanded benefit description	Medical plan	Age limit	Service limit
Prenatal/perinatal services	MMA	10 to 59	<ul style="list-style-type: none"> • 1 hospital-grade breast pump per year, rental only • 1 regular breast pump per 2 years, rental only • Prenatal visits, 14 visits for low-risk pregnancies, 18 visits for high-risk pregnancies • Postpartum care, 3 visits within 90 days following delivery
Prevention kit—flu/pandemic	All	18 and older	<p>A flu/pandemic prevention kit that includes:</p> <ul style="list-style-type: none"> • 10 3-ply face masks • Hand sanitizer • Oral digital thermometer <p>Available to first 1,000 Humana Healthy Horizons members (18 and older) who get a flu vaccine</p> <p>Humana Healthy Horizons sends kits to qualifying members</p>
Primary care visits	MMA	21 and older	Unlimited for members who are not pregnant
Respiratory therapy services	MMA	21 and older	<ul style="list-style-type: none"> • 1 evaluation/re-evaluation per year • 1 therapy treatment per day • No prior authorization needed for initial assessment • Prior authorization required for ongoing treatment

Expanded benefit description	Medical plan	Age limit	Service limit
Speech therapy services	MMA	21 and older	<ul style="list-style-type: none"> • 1 evaluation/re-evaluation per year • 1 evaluation of oral and pharyngeal swallowing function per year • Up to 7 therapy treatments per week • 1 augmentative and alternative communication (AAC) initial evaluation and re-evaluation per year • Up to 4 30-minute AAC fitting, adjustment, and training sessions per year • No prior authorization needed for initial assessment • Prior authorization required for ongoing treatment
Swimming lessons (drowning prevention)	MMA	Birth to 21	Reimbursement of up to \$200 per year for the first 1,000 participants
Transportation—caregiver	LTC	18 and older	<ul style="list-style-type: none"> • Eligible caregivers for members who are 18 and older living in an assisted living facility can get 4 one-way trips per month to visit the member in the facility <p>To set up transportation, call member’s care manager</p>
Transportation—Non-medical	LTC	21 and older	3 round trips per month as approved by care manager
Tutoring	MMA	Grades K-12	Members in grades K-12 can access online tutoring services for 2 hours per week
Vaccine—flu	All	21 and older	Unlimited
Vaccine—Hep A	All	21 and older	2-dose vaccine
Vaccine—pneumonia	All	21 and older	Unlimited
Vaccine—shingles	All	21 and older	1 per year
Vaccine—Tdap	MMA	21 and older	1 per pregnancy
Vision services	All	21 and older	<ul style="list-style-type: none"> • 1 eye exam per year • 1 pair of frames per year • Member pays any cost that exceeds \$75 for luxury frames • A 6-month supply of contact lenses with a doctor’s prescription • Glasses or contacts, not both, during the plan year
Waived copayments	All	21 and older	No copays on any services