

<b>SERVICES THAT REQUIRE NO Referral &amp; NO Prior Authorization:</b>	
<b>Benefit</b>	<b>Covered</b>
Ambulance transport- emergency	Yes
Blood transfusions-general	Yes
Blood transfusions-autologous	Covered for Medicaid. (Not covered for CHP & FHP.)
Chemotherapy - inpatient	Yes
Chemotherapy - outpatient	Yes
Colonoscopy	Yes
Contraceptives - oral & implantable	Covered by Caremark for CHP. Implantable performed by doctor payable by plan. (Medicaid & FHP covered by Medicaid FFS.)
Dental Care - prior to 3/1/2010	All NHP lines of business covered by HealthPlex - call 1-800-468-9868; SHP Medicaid covered by Medicaid FFS.
Dental Care - 3/1/2010 & thereafter	All NHP lines of business covered by DentaQuest (formerly known as Doral) - call 1-888-307-6549
Dialysis - Inpatient	Yes
Dialysis - Outpatient	Yes
ECHOs	Yes
Emergency Room Visits	Yes
Family Planning	Yes
GYN well visits	Yes
Hearing Tests by an Audiologist	Yes
Immunizations	Yes
Inpatient Hospital Admissions-Emergency	Yes. Notification required within 24 hours.
Injectable medications (self-injectables)	Covered for CHP under pharmacy benefit except for certain high cost formulary drugs - see formulary www.getnhp.com. Medicaid & FHP covered by Medicaid FFS.
Laboratory & Pathology services	Yes
Mammography-annual screening	Yes
Mammography-diagnostic	Yes
Midwife services	Yes
Occupational Therapy	Yes. Medicaid unlimited coverage, FHP/CHP - 20 visits per calendar yr.
Pap Smears (routine & diagnostic)	Yes
Physical Therapy	Yes- Medicaid unlimited coverage, FHP/CHP -20 visits per calendar yr.
Pre-surgical testing	Yes
Radiation therapy	Yes
Radiology (including interpretation)	Yes
Sterilizations - outpatient	Yes
Vision Care	NHP: Davis Vision 1-800-999-5431; SHP: General Vision 1-800-847-4661.
Urgent care	Yes
X-rays (including interpretation)	Yes

<b>SERVICES REQUIRING A REFERRAL FORM:</b>	
<b>Benefit</b>	<b>Covered</b>
Allergy Testing & injections	Yes
Nutritional Counseling	Yes
Podiatry Care	Yes
Second Opinion	Yes
Specialist referral in network	Yes

<b>SERVICES REQUIRING PRIOR AUTHORIZATION:</b>		<b>Comments</b>
<b>Benefit</b>	<b>Covered</b>	
Ambulance transport / Ambulette Transport - non emergent	NHP - covered for Medicaid & FHP members 19 or 20 years old. (Not covered for CHP; SHP Medicaid - covered by Medicaid FFS.)	Providers should complete NHP's Transportation Prior Approval Fax Form & send to NHP Care Management who will complete the authorization & coordinate with the member.
Ambulatory Surgery	Yes	Yes-only for cosmetic & non par services
Birth Centers	Yes	
Cardiac Rehab	Yes	
Cosmetic Surgery	Not covered unless reconstructive surgery (1) when following surgery from trauma, infection or other disease of the part of the body involved or (2) when required to correct a functional defect resulting from congenital disease or anomaly.	
CT scans	Yes	Prior authorization is only required for pelvic, head, brain & cardiac.
Diabetic Management- supplies, monitors, nutrition therapy, glucose monitoring supplies, self training.	Covered by Caremark for CHP (Medicaid & FHP covered by Medicaid FFS)	Prior authorization is required for Insulin Pump & any supplies greater than \$250
Dialysis - Out of area	Yes	
Durable Medical Equipment	Yes	Prior authorization is required if greater than \$250. All rental equipment requires authorization.
Erectile Dysfunction	Yes for Medicaid & FHP.	
Growth Hormone	Covered by Caremark for CHP (Medicaid & FHP covered by Medicaid FFS)	Prior authorization required for CHP
Hearing Aids	Yes	Prior authorization is required if greater than \$250. All rental equipment requires authorization.
Hearing Implants	Yes	
Home Health Care	Yes- Medicaid unlimited coverage, FHP & CHP: 40 visits per calendar year	
Hospice Care	Covered for CHP & FHP (Medicaid covered by Medicaid FFS)	
Injectable medications (performed in office)	Covered for Medicaid, FHP & CHP	Prior auth not required for antibiotic and chemo related injections. All else require prior auth
Inpatient Hospital Admissions- Elective	Yes	
Mental Health -inpatient mental health, detox or substance abuse (chemical dependence)	Covered for CHP, FHP & non-SSI Medicaid limited to 30 inpatient days per calendar year (NHP/SHP SSI covered by Medicaid FFS)	Yes, Beacon Health Strategies 866-969-2661
Mental Health -outpatient	Covered for CHP, FHP & non-SSI Medicaid limited to 60 visits per calendar year (NHP/SHP SSI covered by Medicaid FFS)	Yes, Beacon Health Strategies 866-969-2661
Mental Health - outpatient substance abuse (chemical dependence)	CHP & FHP limited to 60 visits per calendar yr. (NHP/SHP Medicaid covered by Medicaid FFS).	Yes, Beacon Health Strategies 866-969-2661
Mental Health -detox outpatient	Covered for Medicaid, CHP & FHP. CHP & FHP limited to 60 visits per calendar yr.	Yes, Beacon Health Strategies 866-969-2661
MRI	Yes	
Nuclear Medicine	Yes	
Nutrition feedings-enteral feedings (Ensure)	Covered for CHP (Medicaid & FHP covered by Medicaid FFS)	Depends on the provider of service: If via Pharmacy a Rx is needed; if obtained through Home Infusion, an auth is required.
Outpatient Surgery	Yes	Yes-only for cosmetic & non par services
Orthopedic Shoes	Covered for Medicaid. ( Not covered for CHP & FHP.)	Yes, regardless of the amount.
Orthotics/Braces	Yes	Prior authorization is required if greater than \$250.
Pet Scans	Yes	
Pharmacy-prescription drugs	Covered for CHP - Caremark formulary applies and some drugs require prior authorization, step therapy or quantity limits. (Medicaid & FHP covered by Medicaid FFS.)	See Formulary for drugs requiring prior auth, step therapy or quantity limits at www.getnhp.com. Call NHP UM for approval 1-800-765-3805; or Call SHP UM for approval 1-800-250-5007
Private duty nursing	Yes	
Prosthesis- Artificial limbs & eyes & braces	Yes	
Rehabilitation-acute inpatient	Yes	
Sonograms	Yes	Yes, EXCEPT for maternity related sonograms which do not require prior auth.
Speech Therapy	Yes	1st visit for evaluation doesn't require prior authorization; add'l visits require prior auths
Sterilizations - inpatient	Yes	If inpatient claim rec'd with newborn DRG & tubal ligation performed after birth, i.e. during the stay, no authorization is needed.
Transplants	Yes	
Transportation-Routine-non emergent includes car service & ambulette	NHP - covered for Medicaid & FHP members 19 or 20 years old. (Not covered for CHP; SHP Medicaid - covered by Medicaid FFS.)	Providers should complete NHP's Transportation Prior Approval Fax Form & send to NHP Care Management who will complete the authorization & coordinate with the member.