

Appendix B. Benefits Mapping (Standards 5 & 8)

**Appendix B1. Benefits Mapping (IP, OP, Emergency), by Benefit Package and
Delivery System (Standard 5)**

**Appendix B2. Benefits Mapping and NQTLs Subject to Parity Analysis Crosswalk,
by Delivery System (Standard 8)**

Appendix B1. Benefits Mapping Standard 5

The tables in *Appendix B1* represent the benefits analyzed in MDH's parity report. Each benefit has been analyzed and classified both by type of service as well as by delivery system. MDH adopted the following definitions for each benefits classification:

- Inpatient: Any non-emergency service that involves the individual staying overnight at a facility. This includes inpatient overnight MH and SUD treatment and crisis stabilization services occurring in a facility. This classification includes all covered services or items provided to a beneficiary when a physician has written an order for admission to a facility.
- Outpatient: Services (primary care or specialist) that are provided to a beneficiary in a setting that does not require a physician's order for admission and do not meet the definition of emergency care.¹
- Prescription Drugs: Covered medications, drugs and associated supplies requiring a prescription, and services delivered by a pharmacist who works in a free-standing pharmacy.
 - For the purposes of the benefits mapping, Prescription Drugs are not included and are addressed in *Appendix F: Prescription Drugs Subject to NQTLs, by Delivery System*.
- Emergency: All covered services or items delivered in an emergency department (ED) setting or to stabilize an emergency/crisis, other than in an inpatient setting.

Services are also broken out by benefit package according to the covered population. The benefit packages are as follows:

- Medicaid Children (C)
- Medicaid Adults (A)
- Pregnant Women (PW)

Services are also administered by different delivery systems; these services are color coded as follows:

- **Red** – Fee for service (FFS) or Long Term Services and Supports (LTSS) benefit
- **Navy** - Dental FFS benefit²
- **Green** - MCO
- **Bright Blue** – ASO

¹ The URAC ParityManager™ tool separates between Outpatient - Office services and Outpatient - Other services. For the purposes of this report, those two categories have been merged to create a single Outpatient classification.

² Please note that for the purposes of the parity analysis, the children's dental package was analyzed rather an adult MCO dental plan (which is a value-added benefit). Former foster care enrollees, up at age 26, have access to dental benefits identical to those covered for children.

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Inpatient Services

Inpatient MH	C	A	PW	Inpatient SUD	C	A	PW	Inpatient: M/S	C	A	PW
Acute Care Services	X	X	X	Inpatient Detoxification--hospital	X	X	X	Nursing Facility: Nursing services		X	X
Ancillary Services-MH	X	X	X	Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X	X	X	Nursing Facility: Dietary services		X	X
Anesthesia--Inpatient	X	X	X	Residential SUD Treatment--ASAM 3.1		X	X	Nursing Facility: Physician services		X	X
Electroconvulsive therapy (ECT)--inpatient	X	X	X	Residential SUD Treatment--ASAM 3.3		X	X	Nursing Facility: Specialized rehabilitation		X	X
Patient Consultation	X	X	X	Residential SUD Treatment--ASAM 3.5		X	X	Nursing Facility: Social work		X	X
Psychological or neuropsychological testing and evaluation--inpatient	X	X	X	Residential SUD Treatment--ASAM 3.7		X	X	Nursing Facility: Activities		X	X
Individual therapy—MH inpatient	X	X	X	Residential SUD Treatment--ASAM 3.7WM (Licensed ASAM 3.7D in Maryland)		X	X	Nursing Facility: Pharmaceutical services		X	X
Group therapy—MH inpatient	X	X	X	Inpatient ASAM 4.0		X	X	Nursing Facility: Laboratory, radiology and other diagnostic testing		X	X
Family therapy—MH inpatient	X	X	X	Nursing Facility: SUD services		X	X	Nursing Facility: Dental services		X	X
Special Psychiatric Hospital	X	X	X	Individual therapy—SUD inpatient	X	X	X	Hospice: Short-term inpatient care		X	X
Residential Treatment Centers	X	X	X	Group therapy—SUD inpatient	X	X	X	Acute Care Services (Births/Deliveries)	X	X	X
Nursing Facility: MH services		X	X	Family therapy—SUD inpatient	X	X	X	Acute Care Services (Medical/Surgical)	X	X	X
				Discharge Day	X	X	X	Amputations--inpatient	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Inpatient MH	C	A	PW	Inpatient SUD	C	A	PW	Inpatient: M/S	C	A	PW
				Ancillary Services-SUD	X	X	X	Ancillary Services	X	X	X
								Anesthesia--Inpatient	X	X	X
								Bariatric Surgery	X	X	X
								Bypass surgery--inpatient	X	X	X
								Cardiac Procedures (non-emergent)--inpatient	X	X	X
								Chemotherapy--inpatient	X	X	X
								Corrective Surgery--inpatient	X	X	X
								Cosmetic Procedures--Inpatient	X	X	X
								Diagnostic and X-ray services: CT--inpatient	X	X	X
								Diagnostic and X-ray services: MRI--inpatient	X	X	X
								Diagnostic and X-ray services: PET--inpatient	X	X	X
								Diagnostic and X-ray services: Radiography--inpatient	X	X	X
								Dialysis--Inpatient	X	X	X
								Erectile Dysfunction Procedures	X	X	X
								Eye Procedures--Inpatient	X	X	X
								Gender affirmation surgery	X	X	X
								Grafts/Implants	X	X	X
								Occupational Therapy--inpatient	X	X	X
								Physical Therapy--inpatient	X	X	X
								Speech Therapy--inpatient	X	X	X
								Hospice Care--Inpatient	X	X	X
								Hospital Care--inpatient	X	X	X
								Hysterectomy	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Inpatient MH	C	A	PW	Inpatient SUD	C	A	PW	Inpatient: M/S	C	A	PW
								Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X	X	X
								Investigational Surgeries/Clinical Trials--inpatient	X	X	X
								Neurostimulators	X	X	X
								Neurosurgical procedures--inpatient	X	X	X
								NICU/Sick baby/Detained baby	X	X	X
								Oncology Services--inpatient	X	X	X
								Plastic and Restorative Surgery--inpatient	X	X	X
								Post-Stabilization Services-inpatient	X	X	X
								Rehabilitation Services (Acute)	X	X	X
								Room and Board	X	X	X
								Spinal Cord Stimulator	X	X	X
								Surgery (non-urgent)--inpatient	X	X	X
								Surgery (urgent)--inpatient	X	X	X
								Transplants	X	X	X
								Transplants Pre and Post Transplant Services	X	X	X
								Transportation between hospitals	X	X	X
								Sterilization services--inpatient	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient Services

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
Primary Mental Health Services (assessment, clinical evaluation, referral to ASO)	X	X	X	Primary Substance Use Disorder Services (assessment, clinical evaluation, referral to ASO)	X	X	X	Preventive services (semiannual cleanings, fluoride, etc.) - Clinic;	X		X
Biofeedback	X	X	X	SBIRT	X	X	X	Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;	X		X
Educational Therapy	X	X	X	Alcohol and/or drug assessment	X	X	X	Restorative services (fillings, crowns, etc.) - Clinic;	X		X
Electroconvulsive therapy (ECT)--outpatient	X	X	X	Ambulatory detoxification	X	X	X	Endodontic services (root canals, etc.) - Clinic;	X		X
Family Psycho-Educational Therapy	X	X	X	Group therapy--outpatient	X	X	X	Periodontal services (scaling, full mouth debridement, etc.) - Clinic;	X		X
Family Therapy--outpatient	X	X	X	Individual therapy--outpatient	X	X	X	Prosthodontics (dentures, etc.) - Clinic;	X		X
Group therapy--outpatient	X	X	X	Intensive Outpatient (IOP)--ASAM 2.1	X	X	X	Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;	X		X
Health Behavior Assessment	X	X	X	MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)	X	X	X	Orthodontic services - Clinic;	X		X
Health Behavior Reassessment	X	X	X	MAT Initial Intake (Evaluation and Management, Including Rx)	X	X	X	Anesthesia - Clinic	X		X
Individual Psycho-Educational Therapy	X	X	X	MAT Ongoing (Evaluation and Management, including Rx)	X	X	X	Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;	X		
Individual therapy--outpatient	X	X	X	Partial Hospitalization (PHP)--ASAM 2.5	X	X	X	Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;	X		

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
Intensive outpatient (IOP)	X	X	X	Opioid Treatment Program (OTP) services - including med management	X	X	X	Restorative services (fillings, crowns, etc.) - OP OR/ASC;	X		
Mental health assessment	X	X	X	Buprenorphine guest dosing	X	X	X	Endodontic services (root canals, etc.) - OP OR/ASC;	X		
Mental health reassessment	X	X	X	Methadone guest dosing	X	X	X	Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;	X		
Multiple family group therapy	X	X	X	Methadone Maintenance	X	X	X	Prosthodontics (dentures, etc.) - OP OR/ASC;	X		
Partial hospitalization (PHP)	X	X	X	Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified	X	X	X	Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;	X		
Psychiatric Rehabilitation Services	X	X	X	Drug Testing	X	X	X	Anesthesia – OP, OR/ASC.	X		
Psychological or neuropsychological testing and evaluation	X	X	X	Laboratory Services	X	X	X	HH ³ : Physical therapy	X	X	X
Therapeutic Behavioral Services	X	X	X	Health home services for SUD (opioid addiction) - opioid treatment program	X	X	X	HH: Occupational therapy	X	X	X
Transcranial Magnetic Stimulation (TMS)	X	X	X					HH: Speech therapy	X	X	X
Traumatic Brain Injury (TBI) Day Habilitation	X	X	X					Hospice: Physician services		X	X
Evaluation and Management-Outpatient	X	X	X					Hospice: Counseling services (including dietary, spiritual and bereavement)		X	X
Laboratory Services	X	X	X					Hospice: Physical therapy		X	X

³ HH stands for Home Health

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
Mobile treatment-Assertive community treatment (ACT)	X	X	X					Hospice: Occupational therapy		X	X
Mobile treatment-non-ACT	X	X	X					Hospice: Speech therapy		X	X
Targeted Case Management	X	X	X					PACE ⁴ : Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology)		X	X
Health home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs	X	X	X					PACE: Rehabilitation		X	X
								ICS ⁵ : Nutritionist/Dietician		X	X
								ICS: Behavioral consultation		X	X
								1915c ⁶ : Physician participation in plan of care meeting		X	X
								Home and Community Based Options waiver		X	X
								HCBS ⁷ : nutritionist/Dietician		X	X
								HCBS: behavioral consultation		X	X
								HIV/AIDS laboratory services		X	X
								Augmentive communication devices	X	X	X
								Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)	X	X	X

⁴ PACE stands for Program for All-Inclusive Care for the Elderly

⁵ ICS stands for Increased Community Services

⁶ 1915c stands for services covered the Department’s 1915c waiver

⁷ HCBS stands for Home and Community Based Services

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Oxygen		X	X
								HH: registered Nurse		X	X
								HH: Home Health Aide		X	X
								Hospice: nursing services		X	X
								Hospice: Medical social services		X	X
								Hospice: Medical appliances and supplies		X	X
								Hospice: home health and aide services		X	X
								PACE: Day health care		X	X
								PACE: In-home care		X	X
								PACE: Nursing care		X	X
								PACE: Personal care		X	X
								PACE: Meals		X	X
								PACE: Recreation		X	X
								PACE: Social work		X	X
								PACE: Transportation		X	X
								CPAS and CFC ⁸ : Nurse monitoring		X	X
								CPAS and CFC: Personal assistance services	X	X	X
								CFC: Personal emergency response system	X	X	X
								CFC: Transition services	X	X	X
								CFC: Consumer training	X	X	X
								CFC: home delivered meals	X	X	X
								CFC: assistive technology	X	X	X
								CFC: Accessibility adaptations	X	X	X

⁸ CPAS stands for Community Personal Assistance Services; CFC stands for Community First Choice

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								CFC: environmental assessments	X	X	X
								CPAS and CFC: Supports Planning	X	X	X
								ICS: case management	X	X	X
								ICS: Medical Day Care	X	X	X
								ICS: Family training	X	X	X
								ICS: Assisted living	X	X	X
								ICS: senior Center Plus	X	X	X
								1915c: case management	X	X	X
								1915c: certified Nursing Assistant/Home Health Aide	X	X	X
								1915c: nursing (private duty) (21+ years of age)		X	X
								1915c: Medical Day Care	X	X	X
								Autism ⁹ : Family leave (retainer day)	X	X	X
								Autism: Residential habilitation (regular and intensive)	X	X	X
								Autism: Intensive individual support services	X	X	X
								Autism: Therapeutic integration (regular and intensive)	X	X	X
								Autism: adult life planning	X	X	X
								Autism: Respite care	X	X	X
								Autism: family training	X	X	X
								Autism: Environmental accessibility adaption	X	X	X
								Brain Injury ¹⁰ : Residential habilitation		X	X

⁹ Autism stands for Autism Waiver Services

¹⁰ Brain Injury stands for Brain Injury Waiver services

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Brain Injury: Day habilitation		X	X
								Brain injury: Supported employment		X	X
								Brain injury: Individual support services		X	X
								Brain injury: medical Day Care		X	X
								HCBS: case management		X	X
								HCBS: Medical Day Care		X	X
								HCBS: family training		X	X
								HCBS: Assisted living		X	X
								HCBS: senior Center Plus		X	X
								Medical Day Care Waiver with associated services	X	X	X
								Community Pathways and Community Supports waivers: Assistive technology and services	X	X	X
								Community Pathways and Community Supports waivers: Behavioral support services	X	X	X
								Community Pathways and Community Supports waivers: Career exploration	X	X	X
								Community Pathways and Community Supports waivers: Community development	X	X	X
								Community Pathways and Community Supports waivers: Day habilitation	X	X	X
								Community Pathways and Community Supports waivers:	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Employment discovery and customization			
								Community Pathways and Community Supports waivers: Employment services	X	X	X
								Community Pathways and Community Supports waivers: Environmental assessment	X	X	X
								Community Pathways and Community Supports waivers: Environmental modification	X	X	X
								Community Pathways and Community Supports waivers: Family and peer mentoring supports	X	X	X
								Community Pathways and Community Supports waivers: Family caregiver training and empowerment	X	X	X
								Community Pathways and Community Supports waivers: Housing support services	X	X	X
								Community Pathways and Community Supports waivers: Individual and family directed goods and services	X	X	X
								Community Pathways and Community Supports waivers: Medical Day Care	X	X	X
								Community Pathways and Community Supports waivers: Nurse case management and delegation	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Community Pathways and Community Supports waivers: Nurse consultation	X	X	X
								Community Pathways and Community Supports waivers: Nurse health case management	X	X	X
								Community Pathways and Community Supports waivers: Participant education, training and advocacy	X	X	X
								Community Pathways and Community Supports waivers: Personal supports	X	X	X
								Community Pathways and Community Supports waivers: Respite care services	X	X	X
								Community Pathways and Community Supports waivers: Support broker services	X	X	X
								Community Pathways and Community Supports waivers: Supported employment	X	X	X
								Community Pathways and Community Supports waivers: Transportation	X	X	X
								Community Pathways and Community Supports waivers: Vehicle modification	X	X	X
								Community Pathways only: community living	X	X	X
								Community Pathways only: live-in caregiver supports	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Community Pathways only: Remote support services	X	X	X
								Community Pathways only: Shared living	X	X	X
								Community Pathways only: Support living	X	X	X
								Community Pathways only: transition services	X	X	X
								Family Supports ¹¹ : Assistive technology and services	X	X	X
								Family Supports: Behavioral support services	X	X	X
								Family Supports: Environmental assessment	X	X	X
								Family Supports: Environmental modification	X	X	X
								Family Supports: Family and peer mentoring supports	X	X	X
								Family Supports: Family caregiver training and empowerment	X	X	X
								Family Supports: Housing support services	X	X	X
								Family Supports: Individual and family directed goods and services	X	X	X
								Family Supports: Nurse case management and delegation	X	X	X
								Family Supports: Nurse consultation	X	X	X
								Family Supports: Participant education, training and advocacy	X	X	X

¹¹ Family Supports stands for Family Supports waiver services

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Family Supports: Personal supports	X	X	X
								Family Supports: Respite care services	X	X	X
								Family Supports: Support broker services	X	X	X
								Family Supports: Transportation	X	X	X
								Family Supports: Vehicle modification	X	X	X
								Health-related services and targeted case management services provided to children when the services are specified in the child’s Individualized Education Plan or Individualized Family Service Plan	X		
								EPSDT ¹² : Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)	X	X	X
								Autism: Intensive individual support services		X	X
								Autism: adult life planning		X	X
								Medical Day Care waiver with associated services(16+ years of age):	X	X	X
								Community Pathways and Community Supports waivers: Nurse case management and delegation		X	X

¹² EPSDT stands for Early and Periodic Screening, Diagnosis, and Treatment

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X
								HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X
								HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)	X	X	X
								HH: Home Health Aide (≤ 1 visit per day; ≤ 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X
								HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X
								HXH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X
								HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))	X	X	X
								HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X
								HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X
								Disposable Medical Supplies (> \$500.00)	X	X	X
								Disposable Medical Supplies (≤ \$500.00)	X	X	X
								Durable Medical Equipment (> \$1,000.00)	X	X	X
								Durable Medical Equipment (≤ \$1,000.00)	X	X	X
								Durable Medical Equipment rental (≤ 3 months)	X	X	X
								Durable Medical Equipment rental (> 3 months)	X	X	X
								Disposable Medical Equipment (w/o HCPCS)	X	X	X
								Durable Medical Equipment (w/o HCPCS)	X	X	X
								Oxygen (w/o HCPCS)	X	X	X
								Acne Services	X	X	X
								Acupuncture	X	X	X
								Amputations--outpatient	X	X	X
								Audiology Services (hearing loss assessment and treatment)	X	X	X
								Blood/Blood Products	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Bypass surgery--outpatient	X	X	X
								Capsule Endoscopy	X	X	X
								Cardiac Procedures (non-emergent)--outpatient	X	X	X
								Cardiac Rehabilitation	X	X	X
								Chemotherapy--outpatient	X	X	X
								Chiropractic Services	X	X	X
								Circumcision	X	X	X
								Clinic Services--FQHC	X	X	X
								Clinic Services--Coumadin Clinic	X	X	X
								Clinic Services--SBHC	X	X	X
								Clinic Services--Other	X	X	X
								Clinic Services--Heart Failure Clinic	X	X	X
								Clinic Services--Wound Clinic	X	X	X
								Corrective Surgery--outpatient	X	X	X
								Cosmetic Procedures/Surgeries--outpatient	X	X	X
								Dermatology Procedures	X	X	X
								Diagnostic and X-ray services: CT--outpatient	X	X	X
								Diagnostic and X-ray services: MRI--outpatient	X	X	X
								Diagnostic and X-ray services: PET--outpatient	X	X	X
								Diagnostic and X-ray services: Radiography--outpatient	X	X	X
								Dialysis--outpatient	X	X	X
								Foster Care Evaluation/Check-up for children entering State custody	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Genetic Counseling	X	X	X
								Grafts/Implants--outpatient	X	X	X
								Hyperbaric Oxygen Therapy	X	X	X
								Infusion/Maintenance Drug Infusion	X	X	X
								Investigational Surgeries/Clinical Trials--outpatient	X	X	X
								National Diabetes Prevention Program Services	X	X	X
								Nerve Stimulator--outpatient	X	X	X
								Neuro-Psychological Testing/Developmental Delay Programs	X	X	X
								Neurosurgical procedures--outpatient	X	X	X
								Newborn Office Services	X	X	X
								Nutritional Counseling	X	X	X
								OB Ultrasound	X	X	X
								Occupational Therapy	X	X	X
								Oncology Treatment	X	X	X
								Oral Surgery Adult	X	X	X
								Oral Surgery Child	X	X	X
								Outpatient hospital care (emergent)	X	X	X
								Outpatient hospital care (non-emergent)	X	X	X
								Outpatient Rehabilitative services	X	X	X
								Outpatient Surgery (Ambulatory Surgery Center)	X	X	X
								Pain Management Procedures	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								Pain Management Visits	X	X	X
								Physical Therapy	X	X	X
								Plastic and Restorative Surgery--outpatient	X	X	X
								Podiatry Services	X	X	X
								Post-Stabilization Services	X	X	X
								Pregnancy-related Services (OB Care)	X	X	X
								Primary Care	X	X	X
								Proton Therapy Treatment	X	X	X
								Pulmonary Rehab	X	X	X
								Sleep Studies /Sleep Apnea Studies	X	X	X
								Somatic services related to gender dysphoria	X	X	X
								Specialty Care	X	X	X
								Speech Therapy--outpatient	X	X	X
								Sterilization Services--outpatient	X	X	X
								Transplants Pre and Post-Transplant Services--outpatient	X	X	X
								Urgent Care	X	X	X
								Vision Services	X	X	X
								Wound Vacuum-assisted closure (VAC)	X	X	X
								Post-Stabilization Services-outpatient	X	X	X
								Care Management	X	X	X
								Targeted Case Management	X	X	X
								Diabetic Education	X	X	X

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Outpatient MH	C	A	PW	Outpatient SUD	C	A	PW	Outpatient M/S	C	A	PW
								National Diabetes Prevention Program	X	X	X
								DME/DMS Alternative Approach ¹³	X	X	X
								Genetic Testing	X	X	X
								Hepatitis C Virus Genotyping	X	X	X
								Home Health Services: medical supplies used for home health visit	X	X	X
								Home Health Services: occupational therapy	X	X	X
								Home Health Services: physical therapy	X	X	X
								Home Health Services: skilled nursing services	X	X	X
								Home Health Services: speech pathology services	X	X	X
								Hospice Care--Outpatient	X	X	X
								Laboratory Services	X	X	X
								Molecular Pathology Labs	X	X	X
								Personal Care Services	X	X	X
								Private Duty Nursing	X	X	X
								Remote Patient Monitoring	X	X	X
								Applied Behavior Analysis (autism services)--primarily in-home	X		

¹³ Please note that this is a name of a full category; any DME/DMS alternative approaches in the MCO tools need to identify any NQTLs that apply to any DME/DMS under the broad category. Description of NQTL factors should be more detailed.

Appendix B1. Benefits Mapping, by Benefit Package and Delivery System (Standard 5)

Emergency Services

Emergency MH	C	A	PW	Emergency SUD	C	A	PW	Emergency M/S	C	A	PW
Emergency Transportation (Ambulance)	X	X	X	Emergency Transportation (Ambulance)	X	X	X	Emergency Services billed with CDT codes	X	X	X
Emergency Room- All inclusive ancillary services	X	X	X	Emergency Room- All-inclusive ancillary services	X	X	X	Emergency Transportation (Ambulance)	X	X	X
Emergency Room- Medications	X	X	X	Emergency Room- Medications	X	X	X	Observation Stay up to 24 h	X	X	X
Emergency Room--Beyond EMTALA Screening	X	X	X	Emergency Room--Beyond EMTALA Screening	X	X	X	Air Ambulance	X	X	X
Emergency Room--EMTALA Screening	X	X	X	Emergency Room--EMTALA Screening	X	X	X	Emergency Transport--Basic Life Support	X	X	X
Emergency Room--Post Stabilization Services	X	X	X	Emergency Room--Post Stabilization Services	X	X	X	Emergency Transport--Advanced Life Support (ALS)	X	X	X
Emergency Room--Stabilization Services	X	X	X	Emergency Room--Stabilization Services	X	X	X	Emergency Room--EMTALA Screening	X	X	X
Emergency Room-Clinical Laboratory	X	X	X	Emergency Room-Clinical Laboratory	X	X	X	Emergency Room--Beyond EMTALA Screening	X	X	X
Emergency Room-General Services	X	X	X	Emergency Room-General Services	X	X	X	Emergency Room- All-inclusive ancillary services	X	X	X
Observation Stay--24 h	X	X	X	Observation Stay--24 h	X	X	X	Emergency Room-General Services	X	X	X
								Emergency Room-Clinical Laboratory	X	X	X
								Emergency Room- Medications	X	X	X
								Emergency Room-Radiology	X	X	X
								Emergency Room- Dental Services	X	X	X
								Emergency Room-Post-Stabilization Services	X	X	X
								Emergency Room--Stabilization Services	X	X	X

ASO Services					
Inpatient Benefits					
Inpatient MH	CR	MNC	OM	PA	SL
Acute Care Services	X	X	X	X	-
Ancillary Services-MH	-	X	-	-	-
Anesthesia--Inpatient	-	X	-	-	-
Electroconvulsive therapy (ECT)--inpatient	-	X	-	-	-
Patient Consultation	-	X	-	-	-
Psychological or neuropsychological testing and evaluation--inpatient	-	X	-	-	-
Individual therapy—MH inpatient	-	X	-	-	-
Group therapy—MH inpatient	-	X	-	-	-
Family therapy—MH inpatient	-	X	-	-	-
Special Psychiatric Hospital	X	X	X	X	-
Residential Treatment Centers	X	X	X	X	-
Nursing Facility: MH services	X	X	X	X	-
Inpatient SUD	CR	MNC	OM	PA	SL
Inpatient Detoxification--hospital	X	X	X	X	-
Inpatient Detoxification-IMD (Licensed Intermediate Care Facilities for Addictions in Maryland)	X	X	X	X	-
Residential SUD Treatment--ASAM 3.1	X	X	X	X	-
Residential SUD Treatment--ASAM 3.3	X	X	X	X	-
Residential SUD Treatment--ASAM 3.5	X	X	X	X	-
Residential SUD Treatment--ASAM 3.7	X	X	X	X	-
Residential SUD Treatment--ASAM 3.7WM (Licensed ASAM 3.7D in Maryland)	X	X	X	X	-
Inpatient ASAM 4.0	X	X	X	X	-

Nursing Facility: SUD services	X	X	X	X	-
Individual therapy—SUD inpatient	-	X	-	-	-
Group therapy—SUD inpatient	-	X	-	-	-
Family therapy—SUD inpatient	-	X	-	-	-
Discharge Day	-	X	-	-	-
Outpatient Benefits					
Outpatient MH	CR	MNC	OM	PA	SL
Biofeedback	X	X	X	X	X
Educational Therapy	-	X	-	-	-
Electroconvulsive therapy (ECT)--outpatient	X	X	X	X	-
Family Psycho-Educational Therapy	-	X	X	-	X
Family Therapy--outpatient	X	X	X	X	X
Group therapy--outpatient	X	X	X	X	X
Health Behavior Assessment	-	X	X	-	X
Health Behavior Reassessment	-	X	X	-	X
Individual Psycho-Educational Therapy	-	X	X	-	-
Individual therapy--outpatient	X	X	X	X	X
Intensive outpatient (IOP)	X	X	X	X	X
Mental health assessment	-	X	X	-	X
Mental health reassessment	-	X	X	-	X
Multiple family group therapy	X	X	X	X	X
Partial hospitalization (PHP)	X	X	X	X	X
Psychiatric Rehabilitation Services	X	X	X	X	X
Psychological or neuropsychological testing and evaluation	X	X	X	X	X
Therapeutic Behavioral Services	X	X	X	X	X
Transcranial Magnetic Stimulation (TMS)	X	X	X	X	
Traumatic Brain Injury (TBI) Day Habilitation	X	X	X	X	

Evaluation and Management-Outpatient	X	X	X	X	X
Laboratory Services	-	X	X	-	-
Mobile treatment-Assertive community treatment (ACT)	X	X	X	X	X
Mobile treatment-non-ACT	X	X	X	X	X
Targeted Case Management	X	X	X	X	X
Health home services for MH reasons (serious and persistent mental illness (SPMI) - services by mobile treatment services (MTS) or psychological rehabilitation programs	X	X	-	X	-
Outpatient SUD	CR	MNC	OM	PA	SL
Alcohol and/or drug assessment		X	X		X
Ambulatory detoxification	X	X	X	X	X
Group therapy--outpatient	X	X	X	X	X
Individual therapy--outpatient	X	X	X	X	X
Intensive Outpatient (IOP)--ASAM 2.1	X	X	X	X	X
MAT Initial Induction: Alcohol/Drug Services; Medical/Somatic (Medical Intervention in Ambulatory Setting)	X	X	X	X	X
MAT Initial Intake (Evaluation and Management, Including Rx)	X	X	X	X	X
MAT Ongoing (Evaluation and Management, including Rx)	X	X	X	X	X
Partial Hospitalization (PHP)--ASAM 2.5	-	X	X	X	X
Opioid Treatment Program (OTP) services - including med management	-	X	X	X	X
Buprenorphine guest dosing	-	X	-	-	-
Methadone guest dosing	-	X	-	-	-
Methadone Maintenance	X	X	-	X	X

Ongoing services (Buprenorphine/Naloxone): Alcohol/Other Drug Abuse Services, Not Otherwise Specified	X	X	-	X	X
Drug Testing	-	X	X	-	-
Laboratory Services	-	X	X	-	-
Health home services for SUD (opioid addiction) - opioid treatment program	-	X	-	-	-
Outpatient-M/S	CR	MNC	OM	PA	SL
Applied Behavior Analysis (autism services)--	X	X	X	X	X

MCO--Inpatient Services									
Inpatient: Concurrent Review	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acute Care Services (Births/Deliveries)	X	X	X	X	-	-	X	X	X
Acute Care Services (Medical/Surgical)	X	X	X	X	X	X	-	X	X
Amputations--inpatient	X	-	X	X	-	X	-	X	X
Ancillary Services	X	-	-	X	-	-	-	-	X
Anesthesia--Inpatient	X	-	-	X	-	-	-	-	X
Bariatric Surgery	X	X	X	X	-	X	-	X	X
Bypass surgery--inpatient	X	-	X	X	-	X	-	X	X
Cardiac Procedures (non-emergent)--inpatient	X	-	X	X	-	X	-	X	X
Chemotherapy--inpatient	X	-	X	X	-	X	-	X	X
Corrective Surgery--inpatient	X	-	X	X	-	X	-	X	X
Cosmetic Procedures--Inpatient	X	-	X	X	-	X	-	X	X
Diagnostic and X-ray services: CT--inpatient	X	-	-	X	-	-	-	-	X
Diagnostic and X-ray services: MRI--inpatient	X	-	-	X	-	-	-	-	X
Diagnostic and X-ray services: PET--inpatient	X	-	-	X	-	-	-	-	X
Diagnostic and X-ray services: Radiography--inpatient	X	-	-	X	-	-	-	-	X
Dialysis--Inpatient	X	-	-	X	-	-	-	-	X
Erectile Dysfunction Procedures	X	-	X	X	-	X	-	-	X
Eye Procedures--Inpatient	X	-	X	X	-	X	-	X	X
Gender affirmation surgery	X	X	X	X	-	X	-	X	X
Grafts/Implants	X	-	X	X	-	X	-	X	X
Occupational Therapy--inpatient	X	-	X	X	-	-	-	-	X
Physical Therapy--inpatient	X	-	X	X	-	-	-	-	X
Speech Therapy--inpatient	X	-	X	X	-	-	-	-	X
Hospice Care--Inpatient	X	X	X	X	X	X	X	-	X

Hospital Care--inpatient	X	X	X	X	X	X	X	-	X
Hysterectomy	X	X	X	X	-	X	-	X	X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X	X	X	X	X	X	X	X	X
Investigational Surgeries/Clinical Trials--inpatient	X	-	X	X	-	X	-	X	X
Neurostimulators	X	-		X	-	X	-	X	X
Neurosurgical procedures--inpatient	X	-	X	X	-	X	-	X	X
NICU/Sick baby/Detained baby	X	-	X	X	X	X	X	X	X
Oncology Services--inpatient	X	-	X	X	-	X	-	X	X
Plastic and Restorative Surgery--inpatient	X	X	X	X	-	X	-	X	X
Post-Stabilization Services-inpatient	X	-	X	X	-	X	-	-	X
Rehabilitation Services (Acute)	X	X	X	X	X	X	X	X	X
Room and Board	X	-	X	X	X	-	-	-	X
Spinal Cord Stimulator	X	-	X	X	-	X	-	X	X
Surgery (non-urgent)--inpatient	X	-	X	X	-	X	-	X	X
Surgery (urgent)--inpatient	X	-	X	X	-	X	-	X	X
Transplants	X	X	X	X	-	X	-	X	X
Transplants Pre and Post Transplant Services	X	X	X	X	-	X	-	-	X
Transportation between hospitals	X	-	-	X	-	-	-	-	-
Sterilization services--inpatient	X	-	X	X	-	X	-	X	X
Inpatient: MNC	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acute Care Services (Births/Deliveries)	X	X	X	X	X	X	X	X	X
Acute Care Services (Medical/Surgical)	X	X	X	X	X	X	X	X	X
Amputations--inpatient	X	X	X	X	X	X	X	X	X
Ancillary Services	X	X	X	X	X	X	X	X	X
Anesthesia--Inpatient	X	X	X	X	X	X	X	X	X
Bariatric Surgery	X	X	X	X	X	X	X	X	X
Bypass surgery--inpatient	X	X	X	X	X	X	X	X	X

Cardiac Procedures (non-emergent)--inpatient	X	X	X	X	X	X	X	X	X
Chemotherapy--inpatient	X	X	X	X	X	X	X	X	X
Corrective Surgery--inpatient	X	X	X	X	X	X	X	X	X
Cosmetic Procedures--Inpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: CT--inpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: MRI--inpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: PET--inpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: Radiography--inpatient	X	X	X	X	X	X	X	X	X
Dialysis--Inpatient	X	X	X	X	X	X	X	X	X
Erectile Dysfunction Procedures	X	X	X	X	X	X	X	X	X
Eye Procedures--Inpatient	X	X	X	X	X	X	X	X	X
Gender affirmation surgery	X	X	X	X	X	X	X	X	X
Grafts/Implants	X	X	X	X	X	X	X	X	X
Occupational Therapy--inpatient	X	X	X	X	X	X	X	X	X
Physical Therapy--inpatient	X	X	X	X	X	X	X	X	X
Speech Therapy--inpatient	X	X	X	X	X	X	X	X	X
Hospice Care--Inpatient	X	X	X	X	X	X	X	X	X
Hospital Care--inpatient	X	X	X	X	X	X	X	X	X
Hysterectomy	X	X	X	X	X	X	X	X	X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X	X	X	X	X	X	X	X	X
Investigational Surgeries/Clinical Trials--inpatient	X	X	X	X	X	X	X	X	X
Neurostimulators	X	X	X	X	X	X	X	X	X
Neurosurgical procedures--inpatient	X	X	X	X	X	X	X	X	X
NICU/Sick baby/Detained baby	X	X	X	X	X	X	X	X	X
Oncology Services--inpatient	X	X	X	X	X	X	X	X	X

Plastic and Restorative Surgery--inpatient	X	X	X	X	X	X	X	X	X
Post-Stabilization Services-inpatient	X	X	X	X	X	X	X	X	X
Rehabilitation Services (Acute)	X	X	X	X	X	X	X	X	X
Room and Board	X	X	X	X	X	X	X	X	X
Spinal Cord Stimulator	X	X	X	X	X	X	X	X	X
Surgery (non-urgent)--inpatient	X	X	X	X	X	X	X	X	X
Surgery (urgent)--inpatient	X	X	X	X	X	X	X	X	X
Transplants	X	X	X	X	X	X	X	X	X
Transplants Pre and Post Transplant Services	X	X	X	X	X	X	X	X	X
Transportation between hospitals	X	X	X	X	X	X	X	X	X
Sterilization services--inpatient	X	X	X	X	X	X	X	X	X
Inpatient: OM	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acute Care Services (Births/Deliveries)	X	X	X	X	X	X	X	X	X
Acute Care Services (Medical/Surgical)	X	X	X	X	X	X	X	X	X
Amputations--inpatient	X	-	X	X	X	X	X	X	X
Ancillary Services	X	-	X	X	X	-	-	X	X
Anesthesia--Inpatient	X	-	X	X	X	-	-	X	X
Bariatric Surgery	X	X	X	X	X	X	X	X	X
Bypass surgery--inpatient	X	-	X	X	X	X	X	X	X
Cardiac Procedures (non-emergent)--inpatient	X	-	X	X	X	X	-	X	X
Chemotherapy--inpatient	X	-	X	X	X	X	X	X	X
Corrective Surgery--inpatient	X	-	X	X	X	X	X	X	X
Cosmetic Procedures--Inpatient	X	-	X	X	X	X	X	X	X
Diagnostic and X-ray services: CT--inpatient	X	-	X	X	X	-	-	X	X
Diagnostic and X-ray services: MRI--inpatient	X	-	X	X	X	-	-	X	X

Diagnostic and X-ray services: PET--inpatient	X	-	X	X	X	-	-	X	X
Diagnostic and X-ray services: Radiography--inpatient	X	-	X	X	X	-	-	X	X
Dialysis--Inpatient	X	-	X	X	X	X		X	X
Erectile Dysfunction Procedures	X	-	X	X	X	X		X	X
Eye Procedures--Inpatient	X	-	X	X	X	X	X	X	X
Gender affirmation surgery	X	X	X	X	X	X	X	X	X
Grafts/Implants	X	-	X	X	X	X	-	X	X
Occupational Therapy--inpatient	X	-	X	X	X	-	-	X	X
Physical Therapy--inpatient	X	-	X	X	X	-	-	X	X
Speech Therapy--inpatient	X	-	X	X	X	-	-	X	X
Hospice Care--Inpatient	X	X	X	X	X	X	X	X	X
Hospital Care--inpatient	X	X	X	X	X	X	X	X	X
Hysterectomy	X	X	X	X	X	X		X	X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X	X	X	X	X	X	X	X	X
Investigational Surgeries/Clinical Trials--inpatient	X	-	X	X	X	X	X	X	X
Neurostimulators	X	-	X	X	X	X		X	X
Neurosurgical procedures--inpatient	X	-	X	X	X	X	X	X	X
NICU/Sick baby/Detained baby	X	-	X	X	X	X	X	X	X
Oncology Services--inpatient	X	-	X	X	X	X		X	X
Plastic and Restorative Surgery--inpatient	X	X	X	X	X	X	-	X	X
Post-Stabilization Services-inpatient	X		X	X	X	X	-	X	X
Rehabilitation Services (Acute)	X	X	X	X	X	X	X	X	X
Room and Board	X	-	X	X	X	-	-	X	X
Spinal Cord Stimulator	X	-	X	X	X	X	-	X	X
Surgery (non-urgent)--inpatient	X	-	X	X	X	X	X	X	X
Surgery (urgent)--inpatient	X	-	X	X	X	X	X	X	X
Transplants	X	X	X	X	X	X	X	X	X

Transplants Pre and Post Transplant Services	X	X	X	X	X	X	-	X	X
Transportation between hospitals	X	-	X	X	X	-	X	X	X
Sterilization services--inpatient	X	-	X	X	X	X	-	X	X
Inpatient: PA	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acute Care Services (Births/Deliveries)	-	-	-	-	-	-	-	-	X
Acute Care Services (Medical/Surgical)	-	-	X	-	-	X	X	X	X
Amputations--inpatient	X	-	X	X	X	-	X	X	X
Ancillary Services	-	-	-	-	-	-	-	-	X
Anesthesia--Inpatient	-	-	-	X	-	-	-	-	X
Bariatric Surgery	X	X	X	X	X	X	X	X	X
Bypass surgery--inpatient	X	-	X	X	X	X	X	X	X
Cardiac Procedures (non-emergent)--inpatient	X	-	X	X	X	X	X	X	X
Chemotherapy--inpatient	X	-	-	X	X	X	X	X	X
Corrective Surgery--inpatient	X	-	X	X	X	X	X	X	X
Cosmetic Procedures--Inpatient	-	-	X	X	X	X	X	X	X
Diagnostic and X-ray services: CT--inpatient	-	-	-	-	-	-	-	-	X
Diagnostic and X-ray services: MRI--inpatient	-	-	-	-	-	-	-	-	X
Diagnostic and X-ray services: PET--inpatient	-	-	X	-	-	-	-	-	X
Diagnostic and X-ray services: Radiography--inpatient	-	-	-	-	-	-	-	-	X
Dialysis--Inpatient	X	-	-	X	-	X	-	-	X
Erectile Dysfunction Procedures	-	-	X	X	X	X	X	-	X
Eye Procedures--Inpatient	X	-	X	X	X	X	X	X	X
Gender affirmation surgery	X	X	X	X	X	X	X	X	X
Grafts/Implants	X	-	X	X	X	X	X	X	X
Occupational Therapy--inpatient	-	-	-	X	-	-	-	-	X

Physical Therapy--inpatient	-	-	-	X	-	-	-	-	X
Speech Therapy--inpatient	-	-	-	X	-	-	-	-	X
Hospice Care--Inpatient	X	X	X	X	X	X	X	-	X
Hospital Care--inpatient	X	X		X		X	X	-	X
Hysterectomy	X	X	X	X	X	X	X	X	X
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	X	X	X	X	X	X	X	X	X
Investigational Surgeries/Clinical Trials--inpatient	X	-	X	X	X	X	X	X	X
Neurostimulators	X	-	X	X	X	X	X	X	X
Neurosurgical procedures--inpatient	X	-	X	X	-	X	X	X	X
NICU/Sick baby/Detained baby	X	-	-	-	-	X	X		X
Oncology Services--inpatient	X	-	-	X	X	X	X	X	X
Plastic and Restorative Surgery--inpatient	X	X	X	X	X	X	X	X	X
Post-Stabilization Services-inpatient	-	-	-	-	-	X	-	-	X
Rehabilitation Services (Acute)	X	X	X	X	X	X	X	X	X
Room and Board	X	-	-	-	-	-	-	-	X
Spinal Cord Stimulator	X	-	X	X	X	X	X	X	X
Surgery (non-urgent)--inpatient	X	-	X	X	X	X	X	X	X
Surgery (urgent)--inpatient	-	-							X
Transplants	X	X	X	X	X	X	X	X	X
Transplants Pre and Post Transplant Services	X	X	-	X	X	X	-	-	X
Transportation between hospitals	X	-	X	X	X	-	X	-	-
Sterilization services--inpatient	-	-	-	-	X	X	X	X	X
Inpatient: SL	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acute Care Services (Births/Deliveries)	-	-	-	-	-	-	-	-	-
Acute Care Services (Medical/Surgical)	-	-	-	-	-	-	-	-	-
Amputations--inpatient	-	-	-	-	-	-	-	-	-
Ancillary Services	-	-	-	-	-	-	-	-	-

Anesthesia--Inpatient	-	-	-	-	-	-	-	-	-
Bariatric Surgery	-	-	-	-	-	-	-	-	-
Bypass surgery--inpatient	-	-	-	-	-	-	-	-	-
Cardiac Procedures (non-emergent)--inpatient	-	-	-	-	-	-	-	-	-
Chemotherapy--inpatient	-	-	-	-	-	-	-	-	-
Corrective Surgery--inpatient	-	-	-	-	-	-	-	-	-
Cosmetic Procedures--Inpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: CT--inpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: MRI--inpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: PET--inpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: Radiography--inpatient	-	-	-	-	-	-	-	-	-
Dialysis--Inpatient	-	-	-	-	-	-	-	-	-
Erectile Dysfunction Procedures	-	-	-	-	-	-	-	-	-
Eye Procedures--Inpatient	-	-	-	-	-	-	-	-	-
Gender affirmation surgery	-	-	-	-	-	-	-	-	-
Grafts/Implants	-	-	-	-	-	-	-	-	-
Occupational Therapy--inpatient	-	-	-	-	-	-	-	-	-
Physical Therapy--inpatient	-	-	-	-	-	-	-	-	-
Speech Therapy--inpatient	-	-	-	-	-	-	-	-	-
Hospice Care--Inpatient	-	-	-	-	-	-	-	-	-
Hospital Care--inpatient	-	-	-	-	-	-	-	-	-
Hysterectomy	-	-	-	-	-	-	-	-	-
Institutional Long Term Care/Skilled Nursing Facility (first 90 days)	-	-	-	-	-	-	-	-	-
Investigational Surgeries/Clinical Trials--inpatient	-	-	-	-	-	-	-	-	-
Neurostimulators	-	-	-	-	-	-	-	-	-
Neurosurgical procedures--inpatient	-	-	-	-	-	-	-	-	-

NICU/Sick baby/Detained baby	-	-	-	-	-	-	-	-	-
Oncology Services--inpatient	-	-	-	-	-	-	-	-	-
Plastic and Restorative Surgery--inpatient	-	-	-	-	-	-	-	-	-
Post-Stabilization Services-inpatient	-	-	-	-	-	-	-	-	-
Rehabilitation Services (Acute)	-	-	-	-	-	-	-	-	-
Room and Board	-	-	-	-	-	-	-	-	-
Spinal Cord Stimulator	-	-	-	-	-	-	-	-	-
Surgery (non-urgent)--inpatient	-	-	-	-	-	-	-	-	-
Surgery (urgent)--inpatient	-	-	-	-	-	-	-	-	-
Transplants	-	-	-	-	-	-	-	-	-
Transplants Pre and Post Transplant Services	-	-	-	-	-	-	-	-	-
Transportation between hospitals	-	-	-	-	-	-	-	-	-
Sterilization services--inpatient	-	-	-	-	-	-	-	-	-

MCO--Outpatient Services*									
<i>(*No MCO reports applying an NQTL to the following services: (1) Outpatient MH Primary Mental Health Services (assessment, clinical evaluation, referral to ASO), (2) Primary Substance Use Disorder Services (assessment, clinical evaluation, referral to ASO), or (3) SBIRT)</i>									
Outpatient: Concurrent Review	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acne Services	X	-	-	-	-	-	X	-	-
Acupuncture	-	-	X	-	X	-	-	-	X
Amputations--outpatient	X	-		X	X	-	-	-	
Audiology Services (hearing loss assessment and treatment)	X	-	X		X	-	-	-	-
Blood/Blood Products	-	-	-			-	-	-	-
Bypass surgery--outpatient	X	-	-	X	X	-	-	-	-
Capsule Endoscopy	X	-	-	X	X	-	-	-	-
Cardiac Procedures (non-emergent)--outpatient	X	-	-	X	-	-	X	-	-
Cardiac Rehabilitation	X	X	X	X	X	-	X	-	-
Chemotherapy--outpatient	X	X	-	X	X	-	-	X	-
Chiropractic Services	-	-	X	-	X	-	-	-	-
Circumcision	X	-	-	X	X	-	-	-	-
Clinic Services--FQHC	-	-	-	-	-	-	-	-	-
Clinic Services--Coumadin Clinic	-	-	-	-	-	-	-	-	-
Clinic Services--SBHC	-	-	-	-	-	-	-	-	-
Clinic Services--Other	-	-	-	-	-	-	-	-	-
Clinic Services--Heart Failure Clinic	-	-	-	-	-	-	-	-	-
Clinic Services--Wound Clinic	X	-	X	-	-	-	X	-	-
Corrective Surgery--outpatient	X	-	-	X	X	-	-	-	-
Cosmetic Procedures/Surgeries--outpatient	X	-	-	-	X	-	-	-	-
Dermatology Procedures	X	-	-	X	X	-	X	-	-
Diagnostic and X-ray services: CT--outpatient	-	-	-	-	X	-	-	-	-

Diagnostic and X-ray services: MRI--outpatient	X	-	-	-	X	-	-	-	-
Diagnostic and X-ray services: PET--outpatient	X	-	-	-	X	-	-	-	-
Diagnostic and X-ray services: Radiography--outpatient	-	-	-	-	-	-	-	-	-
Dialysis--outpatient	-	-	-	X	-	-	-	-	-
Foster Care Evaluation/Check-up for children entering State custody	-	-	-	-	-	-	-	-	-
Genetic Counseling	X	-	-	-	-	-	-	-	-
Grafts/Implants--outpatient	X	-	-	X	-	-	-	-	-
Hyperbaric Oxygen Therapy	X	-	X	X	X	-	X	-	-
Infusion/Maintenance Drug Infusion	X	-	-	-	X	-	-	X	-
Investigational Surgeries/Clinical Trials--outpatient	X	-	X	X	X	-	-	-	-
National Diabetes Prevention Program Services	X	-	-	-	-	-	-	-	-
Nerve Stimulator--outpatient	X	-	-	X	X	-	-	-	-
Neuro-Psychological Testing/Developmental Delay Programs	X	-	X	-	X	-	-	-	-
Neurosurgical procedures--outpatient	X	-	-	X	X	-	-	-	-
Newborn Office Services		-	-	-	-	-	-	-	-
Nutritional Counseling	X	-	-	-	-	X	X	-	-
OB Ultrasound	X	-	-	-	-	-	-	-	-
Occupational Therapy	X	X	X	X	X	X	X	-	X
Oncology Treatment	X	-	-	X	X	-	-	X	-
Oral Surgery Adult	X	-	-	X	X	-	-	-	-
Oral Surgery Child	X	-	-	X	X	-	-	-	-
Outpatient hospital care (emergent)	X	-	-	X	-	-	-	-	-
Outpatient hospital care (non-emergent)	X	-	-	X	-	-	-	-	-
Outpatient Rehabilitative services	X	X	X	X	X	-	X	-	X

Outpatient Surgery (Ambulatory Surgery Center)	X	-	-	X	X	-	-	-	-
Pain Management Procedures	X	X	-	X	X	-	-	-	X
Pain Management Visits	X	-	-	X	-	-	-	-	X
Physical Therapy	X	X	X	X	X	X	X		X
Plastic and Restorative Surgery--outpatient	X	-	-	X	X	-	-	-	-
Podiatry Services	-	-	-	X	X	-	-	-	-
Post-Stabilization Services	-	-	-	X	-	-	-	-	-
Pregnancy-related Services (OB Care)	-	-	-	-	-	-	-	-	-
Primary Care	-	-	-	-	-	-	-	-	-
Proton Therapy Treatment	X	-	X	X	X	-	X	-	-
Pulmonary Rehab	X	X	-	X	-	-	X	-	-
Sleep Studies /Sleep Apnea Studies	X	-	X	X	X	-	-	-	-
Somatic services related to gender dysphoria	-	-	-	X	-	-	-	-	-
Specialty Care	X	-	-	X	-	-	-	-	-
Speech Therapy--outpatient	X	X	-	-	X	X	X	-	X
Sterilization Services--outpatient	X	-	-	-	X	-	-	-	-
Transplants Pre and Post-Transplant Services--outpatient	X	-	X	X	X	-	-	-	-
Urgent Care	-	-	-	-	-	-	-	-	-
Vision Services	-	-	-	-	-	-	-	-	-
Wound Vacuum-assisted closure (VAC)	X	-	X	X	X	-	X	-	-
Post-Stabilization Services-outpatient	-	-	-	X	-	-	-	-	-
Care Management	-	-	-	-	-	-	-	-	-
Targeted Case Management	-	-	-	-	-	-	-	-	-
Diabetic Education	-	-	-	-	-	X	-	-	-
National Diabetes Prevention Program	-	-	-	-	-	-	-	-	-
DME/DMS Alternative Approach[1]	-	X	X	-	X	-	X	X	X
Genetic Testing	-	-	-	X	X	-	-	-	-

Hepatitis C Virus Genotyping	-	-	-	-	X	-	-	-	-
Home Health Services: medical supplies used for home health visit	X	-	X	X	-	X	X	-	-
Home Health Services: occupational therapy	X	X	X	X	X	X	X	-	X
Home Health Services: physical therapy	X	X	X	X	X	X	X	-	X
Home Health Services: skilled nursing services	X	X	X	X	X	X	X	-	X
Home Health Services: speech pathology services	-	X	X	X	X	X	X	-	X
Hospice Care--Outpatient	X	-	X	X	X	-	-	-	X
Laboratory Services	-	-	-	-		-	-	-	-
Molecular Pathology Labs	-	-	-	-	X	-	-	-	-
Personal Care Services	-	-	-	-	-	-		-	X
Private Duty Nursing	-	-	X	-	X	-	X	X	X
Remote Patient Monitoring	X	-	-	-	X	-	-	-	X
Outpatient: MNC	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acne Services	X	X	X	X	X	X	X	X	X
Acupuncture	X	X	X	X	X	X	X	X	X
Amputations--outpatient	X	X	X	X	X	X	X	X	X
Audiology Services (hearing loss assessment and treatment)	X	X	X	X	X	X	X	X	X
Blood/Blood Products	X	X	X	X	X	X	X	X	X
Bypass surgery--outpatient	X	X	X	X	X	X	X	X	X
Capsule Endoscopy	X	X	X	X	X	X	X	X	X
Cardiac Procedures (non-emergent)--outpatient	X	X	X	X	X	X	X	X	X
Cardiac Rehabilitation	X	X	X	X	X	X	X	X	X
Chemotherapy--outpatient	X	X	X	X	X	X	X	X	X
Chiropractic Services	X	X	X	X	X	X	X	X	X
Circumcision	X	X	X	X	X	X	X	X	X

Clinic Services--FQHC	X	X	X	X	X	X	X	X	X
Clinic Services--Coumadin Clinic	X	X	X	X	X	X	X	X	X
Clinic Services--SBHC	X	X	X	X	X	X	X	X	X
Clinic Services--Other	X	X	X	X	X	X	X	X	X
Clinic Services--Heart Failure Clinic	X	X	X	X	X	X	X	X	X
Clinic Services--Wound Clinic	X	X	X	X	X	X	X	X	X
Corrective Surgery--outpatient	X	X	X	X	X	X	X	X	X
Cosmetic Procedures/Surgeries--outpatient	X	X	X	X	X	X	X	X	X
Dermatology Procedures	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: CT--outpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: MRI--outpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: PET--outpatient	X	X	X	X	X	X	X	X	X
Diagnostic and X-ray services: Radiography--outpatient	X	X	X	X	X	X	X	X	X
Dialysis--outpatient	X	X	X	X	X	X	X	X	X
Foster Care Evaluation/Check-up for children entering State custody	X	X	X	X	X	X	X	X	X
Genetic Counseling	X	X	X	X	X	X	X	X	X
Grafts/Implants--outpatient	X	X	X	X	X	X	X	X	X
Hyperbaric Oxygen Therapy	X	X	X	X	X	X	X	X	X
Infusion/Maintenance Drug Infusion	X	X	X	X	X	X	X	X	X
Investigational Surgeries/Clinical Trials--outpatient	X	X	X	X	X	X	X	X	X
National Diabetes Prevention Program Services	X	X	X	X	X	X	X	X	X
Nerve Stimulator--outpatient	X	X	X	X	X	X	X	X	X
Neuro-Psychological Testing/Developmental Delay Programs	X	X	X	X	X	X	X	X	X

Neurosurgical procedures--outpatient	X	X	X	X	X	X	X	X	X
Newborn Office Services	X	X	X	X	X	X	X	X	X
Nutritional Counseling	X	X	X	X	X	X	X	X	X
OB Ultrasound	X	X	X	X	X	X	X	X	X
Occupational Therapy	X	X	X	X	X	X	X	X	X
Oncology Treatment	X	X	X	X	X	X	X	X	X
Oral Surgery Adult	X	X	X	X	X	X	X	X	X
Oral Surgery Child	X	X	X	X	X	X	X	X	X
Outpatient hospital care (emergent)	X	X	X	X	X	X	X	X	X
Outpatient hospital care (non-emergent)	X	X	X	X	X	X	X	X	X
Outpatient Rehabilitative services	X	X	X	X	X	X	X	X	X
Outpatient Surgery (Ambulatory Surgery Center)	X	X	X	X	X	X	X	X	X
Pain Management Procedures	X	X	X	X	X	X	X	X	X
Pain Management Visits	X	X	X	X	X	X	X	X	X
Physical Therapy	X	X	X	X	X	X	X	X	X
Plastic and Restorative Surgery--outpatient	X	X	X	X	X	X	X	X	X
Podiatry Services	X	X	X	X	X	X	X	X	X
Post-Stabilization Services	X	X	X	X	X	X	X	X	X
Pregnancy-related Services (OB Care)	X	X	X	X	X	X	X	X	X
Primary Care	X	X	X	X	X	X	X	X	X
Proton Therapy Treatment	X	X	X	X	X	X	X	X	X
Pulmonary Rehab	X	X	X	X	X	X	X	X	X
Sleep Studies /Sleep Apnea Studies	X	X	X	X	X	X	X	X	X
Somatic services related to gender dysphoria	X	X	X	X	X	X	X	X	X
Specialty Care	X	X	X	X	X	X	X	X	X
Speech Therapy--outpatient	X	X	X	X	X	X	X	X	X
Sterilization Services--outpatient	X	X	X	X	X	X	X	X	X

Transplants Pre and Post-Transplant Services--outpatient	X	X	X	X	X	X	X	X	X
Urgent Care	X	X	X	X	X	X	X	X	X
Vision Services	X	X	X	X	X	X	X	X	X
Wound Vacuum-assisted closure (VAC)	X	X	X	X	X	X	X	X	X
Post-Stabilization Services-outpatient	X	X	X	X	X	X	X	X	X
Care Management	X	X	X	X	X	X	X	X	X
Targeted Case Management	X	X	X	X	X	X	X	X	X
Diabetic Education	X	X	X	X	X	X	X	X	X
National Diabetes Prevention Program	X	X	X	X	X	X	X	X	X
DME/DMS Alternative Approach[1]	X	X	X	X	X	X	X	X	X
Genetic Testing	X	X	X	X	X	X	X	X	X
Hepatitis C Virus Genotyping	X	X	X	X	X	X	X	X	X
Home Health Services: medical supplies used for home health visit	X	X	X	X	X	X	X	X	X
Home Health Services: occupational therapy	X	X	X	X	X	X	X	X	X
Home Health Services: physical therapy	X	X	X	X	X	X	X	X	X
Home Health Services: skilled nursing services	X	X	X	X	X	X	X	X	X
Home Health Services: speech pathology services	X	X	X	X	X	X	X	X	X
Hospice Care--Outpatient	X	X	X	X	X	X	X	X	X
Laboratory Services	X	X	X	X	X	X	X	X	X
Molecular Pathology Labs	X	X	X	X	X	X	X	X	X
Personal Care Services	X	X	X	X	X	X	X	X	X
Private Duty Nursing	X	X	X	X	X	X	X	X	X
Remote Patient Monitoring	X	X	X	X	X	X	X	X	X
Outpatient-OM	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acne Services	X	-	X	X	-	-	X	X	X
Acupuncture	X	-	X	-	-	X	X	X	X

Amputations--outpatient	X	X	X	X	-		X	X	X
Audiology Services (hearing loss assessment and treatment)	X	-	X	-	-	X	X	X	X
Blood/Blood Products	X	-	X	X	-	-	X	X	X
Bypass surgery--outpatient	X	X	X	X	-	-	X	X	X
Capsule Endoscopy	X	-	X	X	-	-	X	X	X
Cardiac Procedures (non-emergent)--outpatient	X	X	X	X	-	X	X	X	X
Cardiac Rehabilitation	X	X	X	X	-	X	X	X	X
Chemotherapy--outpatient	X	X	X	X	-	-	X	X	X
Chiropractic Services	X	-	X		-	X	X	X	X
Circumcision	X	-	X	X	-	-	X	X	X
Clinic Services--FQHC	X	-	X	X	-	-	X	X	X
Clinic Services--Coumadin Clinic	X	-	X	X	-	X	X	X	X
Clinic Services--SBHC	X	-	X	X	-	-	X	X	X
Clinic Services--Other	X	-	X	X	-	-	X	X	X
Clinic Services--Heart Failure Clinic	X	-	X	X	-	X	X	X	X
Clinic Services--Wound Clinic	X	-	X	X	-	-	X	X	X
Corrective Surgery--outpatient	X	X	X	X	-	-	X	X	X
Cosmetic Procedures/Surgeries--outpatient	X	-	X	X	-	X	X	X	X
Dermatology Procedures	X	X	X	X	-	-	X	X	X
Diagnostic and X-ray services: CT--outpatient	X	X	X	X	-	-	X	X	X
Diagnostic and X-ray services: MRI--outpatient	X	X	X	X	-	-	X	X	X
Diagnostic and X-ray services: PET--outpatient	X	X	X	X	-	-	X	X	X
Diagnostic and X-ray services: Radiography--outpatient	X	-	X	X	-	-	X	X	X
Dialysis--outpatient	X	-	X	X	-	-	X	X	X

Foster Care Evaluation/Check-up for children entering State custody	X	-	X	X	-	-	X	X	X
Genetic Counseling	X	-	X	X	-	X	X	X	X
Grafts/Implants--outpatient	X	X	X	X	-		X	X	X
Hyperbaric Oxygen Therapy	X	X	X	X	-	X	X	X	X
Infusion/Maintenance Drug Infusion	X	X	X	X	-		X	X	X
Investigational Surgeries/Clinical Trials--outpatient	X	X	X	X	-	X	X	X	X
National Diabetes Prevention Program Services	X	-	X	X	-	X	X	X	X
Nerve Stimulator--outpatient	X	-	X	X	-	X	X	X	X
Neuro-Psychological Testing/Developmental Delay Programs	X	-	X	X	-	X	X	X	X
Neurosurgical procedures--outpatient	X	X	X	X	-	-	X	X	X
Newborn Office Services	X	-	X	X	-	-	X	X	X
Nutritional Counseling	X	-	X	X	-	X	X	X	X
OB Ultrasound	X	-	X	X	-	-	X	X	X
Occupational Therapy	X	X	X	X	-	X	X	X	X
Oncology Treatment	X	-	X	X	-	-	X	X	X
Oral Surgery Adult	X	X	X	X	-	X	X	X	X
Oral Surgery Child	X	X	X	X	-	X	X	-	X
Outpatient hospital care (emergent)	X	-	X	X	-	-	X	X	X
Outpatient hospital care (non-emergent)	X	X	X	X	-	-	X	X	X
Outpatient Rehabilitative services	X	X	X	X	-	X	X	X	X
Outpatient Surgery (Ambulatory Surgery Center)	X	X	X	X	-	-	X	X	X
Pain Management Procedures	X	X	X	X	X	X		X	X
Pain Management Visits	X		X	X	-	X	X	X	X
Physical Therapy	X	X	X	X	-	X	X	X	X
Plastic and Restorative Surgery--outpatient	X	X	X	X	-	X	X	X	X

Podiatry Services	X	-	X	X	-	-	X	X	X
Post-Stabilization Services	X	-	X	X	-	-	X	X	X
Pregnancy-related Services (OB Care)	X	-	X	X	-	-	X	X	X
Primary Care	X	-	X	X	X	X	X	X	X
Proton Therapy Treatment	X	X	X	X	-	X	X	X	X
Pulmonary Rehab	X	X	X	X	-	X	X	X	X
Sleep Studies /Sleep Apnea Studies	X	X	X	X	-	X	X	X	X
Somatic services related to gender dysphoria	X	-	X	X	-	-	X	X	X
Specialty Care	X	-	X	X	X	X	X	X	X
Speech Therapy--outpatient	X	X	X	X	-	X	X	X	X
Sterilization Services--outpatient	X	-	X	X	-	-	X	X	X
Transplants Pre and Post-Transplant Services--outpatient	X	X	X	X	-	-	X	X	X
Urgent Care	X	-	X	X	-	-	X	X	X
Vision Services	X	-	X	X	-	X	X	X	X
Wound Vacuum-assisted closure (VAC)	X	-	X	X	-	-	X	X	X
Post-Stabilization Services-outpatient	X	-	X	X	-	-	X	X	X
Care Management	X	-	-	X	-	-	-	-	X
Targeted Case Management	X	-	-	X	-	-	-	-	X
Diabetic Education	X	-	-	X	-	X	-	X	X
National Diabetes Prevention Program	X	-	X	X	-	X	-	X	X
DME/DMS Alternative Approach[1]	X	X	X	X	X	X	X	X	X
Genetic Testing	X	X	X	X	X	X	X	X	X
Hepatitis C Virus Genotyping	X	-	X	X	-	-	X	X	X
Home Health Services: medical supplies used for home health visit	X	-	X	X	-	X	X	X	X
Home Health Services: occupational therapy	X	X	X	X	-	X	X	X	X
Home Health Services: physical therapy	X	X	X	X	-	X	X	X	X

Home Health Services: skilled nursing services	X	X	X	X	-	X	X	X	X
Home Health Services: speech pathology services	X	X	X	X	-	X	X	X	X
Hospice Care--Outpatient	X	-	X	X	-	X	X	X	X
Laboratory Services	X	-	X	X	X	X	X	X	X
Molecular Pathology Labs	X	-	X	X	X	X	X	X	X
Personal Care Services	X	-	X	-	-	-	X	X	X
Private Duty Nursing	X	-	X	-	-	X	X	X	X
Remote Patient Monitoring	X	-	X	X	-	X	X	X	X
Outpatient-PA	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acne Services	X	-	-	-	-	-	X	-	-
Acupuncture	-	-	X	-	X	X	X	X	-
Amputations--outpatient	X	X	X	X	X	X	X	X	X
Audiology Services (hearing loss assessment and treatment)	X	-	X	-	X	X	X	X	-
Blood/Blood Products	-	-	-	-	-	-	-	X	-
Bypass surgery--outpatient	X	X	X	X	X	X		X	X
Capsule Endoscopy	X		X	X	X	X	X	X	
Cardiac Procedures (non-emergent)--outpatient	X	X	X	X	-	X	-	X	X
Cardiac Rehabilitation	X	X	X	X	X	X	X	-	-
Chemotherapy--outpatient	X	X	-	X	X	-	X	X	-
Chiropractic Services	-	-	X	-	X	X	X	-	-
Circumcision	X	-	-	X	X	-	X	-	-
Clinic Services--FQHC	-	-	-	-	-	-	-	-	-
Clinic Services--Coumadin Clinic	-	-	-	-	-	X	-	-	-
Clinic Services--SBHC	-	-	-	-	-	X	-	-	-
Clinic Services--Other	-	-	-	-	-	X	-	-	-
Clinic Services--Heart Failure Clinic	-	-	-	-	-	-	-	-	-
Clinic Services--Wound Clinic	X	-	X	-	-	-	X	-	-

Corrective Surgery--outpatient	X	X	X	X	X	X	X	X	X
Cosmetic Procedures/Surgeries--outpatient	X	-	X	-	X	X	X	X	X
Dermatology Procedures	X	X	X	X	X	-	X	-	-
Diagnostic and X-ray services: CT--outpatient	-	X	-	-	X	-	X	X	-
Diagnostic and X-ray services: MRI--outpatient	X	X	-	-	X	-	X	X	-
Diagnostic and X-ray services: PET--outpatient	X	X	X	-	X	-	X	X	-
Diagnostic and X-ray services: Radiography--outpatient	-	-	-	-	-	-	-	X	-
Dialysis--outpatient	-	-	-	X	-	-	-	-	-
Foster Care Evaluation/Check-up for children entering State custody	-	-	-	-	-	-	-	-	-
Genetic Counseling	X	-	-	-	-	X	-	-	-
Grafts/Implants--outpatient	X	X	X	X	-		X	X	-
Hyperbaric Oxygen Therapy	X	X	X	X	X	X	X		X
Infusion/Maintenance Drug Infusion	X	X		X	X		X	X	X
Investigational Surgeries/Clinical Trials--outpatient	X	X	X	X	X	X	X	X	X
National Diabetes Prevention Program Services	X	-	-	-	-	X	-	-	-
Nerve Stimulator--outpatient	X	-	X	-	X	X	X	X	X
Neuro-Psychological Testing/Developmental Delay Programs	X	-	X	-	X	X	X	X	X
Neurosurgical procedures--outpatient	X	X	X	-	X	X	X	X	-
Newborn Office Services	-	-	-	-	-	-	-	-	-
Nutritional Counseling	X	-	-	-	-	X	X	-	-
OB Ultrasound	X	-	-	-	-	-	X	-	-
Occupational Therapy	X	X	X	X	X	X	X	-	X
Oncology Treatment	X	-	-	X	X	-	X	X	-

Oral Surgery Adult	X	X	-	X	X	X	-	X	-
Oral Surgery Child	X	X	-	X	X	X	-	-	-
Outpatient hospital care (emergent)	X	-	-	-	-	-	-	-	X
Outpatient hospital care (non-emergent)	X	X	-	X	-	X	X	-	X
Outpatient Rehabilitative services	X	X	X	X	X	X	X	X	
Outpatient Surgery (Ambulatory Surgery Center)	X	X	X	X	X	X	X	-	X
Pain Management Procedures	X	X	-	X	X	X	-	-	X
Pain Management Visits	X	-	-	X	-	-	X	-	X
Physical Therapy	X	X	X	X	X	X	X	-	X
Plastic and Restorative Surgery--outpatient	X	X	X	X	X	X	X	X	X
Podiatry Services	-	-	-	X	X	-	X	-	-
Post-Stabilization Services	-	-	-	X	-	-	-	-	-
Pregnancy-related Services (OB Care)	-	-	-	-	-	-	-	-	-
Primary Care	-	-	-	-	-	-	-	-	-
Proton Therapy Treatment	X	X	X	X	X	X	X	X	-
Pulmonary Rehab	X	X	-	X	-	X	X	-	-
Sleep Studies /Sleep Apnea Studies	X	X	X	X	X	-	X	X	X
Somatic services related to gender dysphoria	-	-	-	X	-	X	-	X	-
Specialty Care	X	-	-	-	-	-	-	-	-
Speech Therapy--outpatient	X	X	X	-	X	X	X	-	X
Sterilization Services--outpatient	X	-	-	-	X	-	-	-	-
Transplants Pre and Post-Transplant Services--outpatient	X	X	-	X	X	X	-	X	X
Urgent Care	-	-	-	-	-	-	-	-	-
Vision Services	-	-	-	-	-	-	-	-	-
Wound Vacuum-assisted closure (VAC)	X	-	X	X	X	-	X	X	-
Post-Stabilization Services-outpatient	-	-	-	X	-	-	-	-	-
Care Management	-	-	-	-	-	X	-	-	-

Targeted Case Management	-	-	-	-	-	X	-	-	-
Diabetic Education	-	-	-	-	-	X	-	-	-
National Diabetes Prevention Program	-	-	-	-	-	X	-	-	-
DME/DMS Alternative Approach[1]	-	X	X	X	X	X	X	X	X
Genetic Testing	-	X	X	X	X	X	X	X	
Hepatitis C Virus Genotyping	-	-	X	-	X	-	X	X	X
Home Health Services: medical supplies used for home health visit	X	-	X	X	-	X	X	-	X
Home Health Services: occupational therapy	X	X	X	X	X	X	X	-	X
Home Health Services: physical therapy	X	X	X	X	X	X	X	-	X
Home Health Services: skilled nursing services	X	X	X	X	X	X	X	-	X
Home Health Services: speech pathology services	-	X	X	X	X	X	X	-	X
Hospice Care--Outpatient	X	-	X	X	X	X	X	X	X
Laboratory Services	-	-	-	-	-	X	X	-	-
Molecular Pathology Labs	-	-	X	-	X	X	X	X	-
Personal Care Services	-	-	-	-	-	X	-	X	X
Private Duty Nursing	-	-	X	-	X	X	X	X	X
Remote Patient Monitoring	X	-	X	-	X	X	X	X	X
Outpatient-SL	Aetna	Amerigroup	Jai	KP	MPC	MedStar	Priority	UHC	UMHP
Acne Services	-	-	-	-	-	-	-	-	-
Acupuncture	-	-	-	-	-	-	-	-	-
Amputations--outpatient	-	-	-	-	-	-	-	-	-
Audiology Services (hearing loss assessment and treatment)	-	-	-	-	-	-	-	-	-
Blood/Blood Products	-	-	-	-	-	-	-	-	-
Bypass surgery--outpatient	-	-	-	-	-	-	-	-	-
Capsule Endoscopy	-	-	-	-	-	-	-	-	-

Cardiac Procedures (non-emergent)--outpatient	-	-	-	-	-	-	-	-	-
Cardiac Rehabilitation	-	-	-	-	-	-	-	-	-
Chemotherapy--outpatient	-	-	-	-	-	-	-	-	-
Chiropractic Services	-	-	-	-	-	-	-	-	-
Circumcision	-	-	-	-	-	-	-	-	-
Clinic Services--FQHC	-	-	-	-	-	-	-	-	-
Clinic Services--Coumadin Clinic	-	-	-	-	-	-	-	-	-
Clinic Services--SBHC	-	-	-	-	-	-	-	-	-
Clinic Services--Other	-	-	-	-	-	-	-	-	-
Clinic Services--Heart Failure Clinic	-	-	-	-	-	-	-	-	-
Clinic Services--Wound Clinic	-	-	-	-	-	-	-	-	-
Corrective Surgery--outpatient	-	-	-	-	-	-	-	-	-
Cosmetic Procedures/Surgeries--outpatient	-	-	-	-	-	-	-	-	-
Dermatology Procedures	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: CT--outpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: MRI--outpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: PET--outpatient	-	-	-	-	-	-	-	-	-
Diagnostic and X-ray services: Radiography--outpatient	-	-	-	-	-	-	-	-	-
Dialysis--outpatient	-	-	-	-	-	-	-	-	-
Foster Care Evaluation/Check-up for children entering State custody	-	-	-	-	-	-	-	-	-
Genetic Counseling	-	-	-	-	-	-	-	-	-
Grafts/Implants--outpatient	-	-	-	-	-	-	-	-	-
Hyperbaric Oxygen Therapy	-	-	-	-	-	-	-	-	-
Infusion/Maintenance Drug Infusion	-	-	-	-	-	-	-	-	-

Investigational Surgeries/Clinical Trials--outpatient	-	-	-	-	-	-	-	-	-
National Diabetes Prevention Program Services	-	-	-	-	-	-	-	-	-
Nerve Stimulator--outpatient	-	-	-	-	-	-	-	-	-
Neuro-Psychological Testing/Developmental Delay Programs	-	-	-	-	-	-	-	-	-
Neurosurgical procedures--outpatient	-	-	-	-	-	-	-	-	-
Newborn Office Services	-	-	-	-	-	-	-	-	-
Nutritional Counseling	-	-	-	-	-	-	-	-	-
OB Ultrasound	-	-	-	-	-	-	-	-	-
Occupational Therapy	-	-	-	-	-	-	-	-	-
Oncology Treatment	-	-	-	-	-	-	-	-	-
Oral Surgery Adult	-	-	-	-	-	-	-	-	-
Oral Surgery Child	-	-	-	-	-	-	-	-	-
Outpatient hospital care (emergent)	-	-	-	-	-	-	-	-	-
Outpatient hospital care (non-emergent)	-	-	-	-	-	-	-	-	-
Outpatient Rehabilitative services	-	-	-	-	-	-	-	-	-
Outpatient Surgery (Ambulatory Surgery Center)	-	-	-	-	-	-	-	-	-
Pain Management Procedures	-	-	-	-	-	-	-	-	-
Pain Management Visits	-	-	-	-	-	-	-	-	-
Physical Therapy	-	-	-	-	-	-	-	-	-
Plastic and Restorative Surgery--outpatient	-	-	-	-	-	-	-	-	-
Podiatry Services	-	-	-	-	-	-	-	-	-
Post-Stabilization Services	-	-	-	-	-	-	-	-	-
Pregnancy-related Services (OB Care)	-	-	-	-	-	X	-	-	-
Primary Care	-	-	-	-	-	X	-	-	-
Proton Therapy Treatment	-	-	-	-	-	-	-	-	-
Pulmonary Rehab	-	-	-	-	-	-	-	-	-

Sleep Studies /Sleep Apnea Studies	-	-	-	-	-	-	-	-	-
Somatic services related to gender dysphoria	-	-	-	-	-	-	-	-	-
Specialty Care	-	-	-	-	-	-	-	-	-
Speech Therapy--outpatient	-	-	-	-	-	-	-	-	-
Sterilization Services--outpatient	-	-	-	-	-	-	-	-	-
Transplants Pre and Post-Transplant Services--outpatient	-	-	-	-	-	-	-	-	-
Urgent Care	-	-	-	-	-	-	-	-	-
Vision Services	-	-	-	-	-	-	-	-	-
Wound Vacuum-assisted closure (VAC)	-	-	-	-	-	-	-	-	-
Post-Stabilization Services-outpatient	-	-	-	-	-	-	-	-	-
Care Management	-	-	-	-	-	-	-	-	-
Targeted Case Management	-	-	-	-	-	-	-	-	-
Diabetic Education	-	-	-	-	-	-	-	-	-
National Diabetes Prevention Program	-	-	-	-	-	-	-	-	-
<u>DME/DMS Alternative Approach</u>	-	-	-	-	-	-	-	-	-
Genetic Testing	-	-	-	-	-	-	-	-	-
Hepatitis C Virus Genotyping	-	-	-	-	-	-	-	-	-
Home Health Services: medical supplies used for home health visit	-	-	-	-	-	-	-	-	-
Home Health Services: occupational therapy	-	-	-	-	-	-	-	-	-
Home Health Services: physical therapy	-	-	-	-	-	-	-	-	-
Home Health Services: skilled nursing services	-	-	-	-	-	-	-	-	-
Home Health Services: speech pathology services	-	-	-	-	-	-	-	-	-
Hospice Care--Outpatient	-	-	-	-	-	-	-	-	-
Laboratory Services	-	-	-	-	-	-	-	-	-
Molecular Pathology Labs	-	-	-	-	-	-	-	-	-

Personal Care Services	-	-	-	-	-	-	-	-	-
Private Duty Nursing	-	-	-	-	-	-	-	-	-
Remote Patient Monitoring	-	-	-	-	-	-	-	-	-

Fee-For-Service					
Inpatient Benefits					
Inpatient: M/S (LTSS)	CR	MNC	OM	PA	SL
Nursing Facility: Nursing services	X	X	X	X	-
Nursing Facility: Dietary services	X	X	X	X	-
Nursing Facility: Physician services	X	X	X	X	-
Nursing Facility: Specialized rehabilitation	X	X	X	X	-
Nursing Facility: Social work	X	X	X	X	-
Nursing Facility: Activities	X	X	X	X	-
Nursing Facility: Pharmaceutical services	X	X	X	X	-
Nursing Facility: Laboratory, radiology and other diagnostic testing	X	X	X	X	-
Nursing Facility: Dental services	X	X	X	X	-
Hospice: Short-term inpatient care	X	X	X	X	-
Outpatient M/S (Dental)	CR	MNC	OM	PA	SL
Preventive services (semiannual cleanings, fluoride, etc.) - Clinic;	-	X	-	-	-
Diagnostic services (oral exams, x-rays, sealants, etc.) - Clinic;	-	X	-	X	-
Restorative services (filings, crowns, etc.) - Clinic;	-	X	-	X	-
Endodontic services (root canals, etc.) - Clinic;	-	X	-	X	-
Periodontal services (scaling, full mouth debridement, etc.) - Clinic;	-	X	-	X	-
Prosthodontics (dentures, etc.) - Clinic;	-	X	-	X	-
Oral and Maxillofacial surgery services (extractions, etc.) - Clinic;	-	X	-	X	-
Orthodontic services - Clinic;	-	X	-	X	-
Anesthesia - Clinic	-	X	-	-	-
Preventive services (semiannual cleanings, fluoride, etc.) - OP OR/ASC;	-	X	X	X	-
Diagnostic services (oral exams, x-rays, sealants, etc.) - OP OR/ASC;	-	X	X	X	-
Restorative services (filings, crowns, etc.) - OP OR/ASC;	-	X	X	X	-
Endodontic services (root canals, etc.) - OP OR/ASC;	-	X	X	X	-
Periodontal services (scaling, full mouth debridement, etc.) - OP OR/ASC;	-	X	X	X	-

Prosthetics (dentures, etc.) - OP OR/ASC;	-	X	X	X	-
Oral and Maxillofacial surgery services (extractions, etc.) - OP OR/ASC;	-	X	X	X	-
Anesthesia – OP, OR/ASC.	-	X	X	X	-
Outpatient M/S (LTSS)	CR	MNC	OM	PA	SL
HH: Physical therapy	X	X	-	-	-
HH: Occupational therapy	X	X	-	-	-
HH: Speech therapy	X	X	-	-	-
Hospice: Physician services	-	X	-	-	-
Hospice: Counseling services (including dietary, spiritual and bereavement)	-	X	-	-	-
Hospice: Physical therapy	-	X	-	-	-
Hospice: Occupational therapy	-	X	-	-	-
Hospice: Speech therapy	-	X	-	-	-
PACE: Medical specialty services (podiatry, psychiatry, dentistry, optometry and audiology)	-	X	X	X	-
PACE: Rehabilitation	-	X	X	X	-
ICS: Nutritionist/Dietician	X	X	-	X	-
ICS: Behavioral consultation	X	X	-	X	-
1915c: Physician participation in plan of care meeting	-	X	-	-	-
Home and Community Based Options waiver	-	X	-	-	-
HCBS: nutritionist/Dietician	X	X	-	X	-
HCBS: behavioral consultation	X	X	-	X	-
HIV/AIDS laboratory services	-	X	-	-	-
Augmentive communication devices	-	X	-	-	-
Durable Medical Equipment (DME)/Disposable Medical Supplies (DMS)	X	X	-	-	-
Oxygen	-	X	X	-	-
HH: registered Nurse	X	X	-	-	-
HH: Home Health Aide	X	X	-	-	-
Hospice: nursing services	X	X	-	-	-

Hospice: Medical social services	X	X	-	-	-
Hospice: Medical appliances and supplies	X	X	-	-	-
Hospice: home health and aide services	X	X	-	-	-
PACE: Day health care	X	X	X	-	-
PACE: In-home care	X	X	X	X	-
PACE: Nursing care	X	X	X	X	-
PACE: Personal care	X	X	X	X	-
PACE: Meals	X	X	X	X	-
PACE: Recreation	X	X	X	X	-
PACE: Social work	X	X	X	X	-
PACE: Transportation	X	X	X	X	-
CPAS and CFC: Nurse monitoring	X	X	-	X	-
CPAS and CFC: Personal assistance services	X	X	X	X	-
CFC: Personal emergency response system	X	X	-	X	-
CFC: Transition services	X	X	-	X	-
CFC: Consumer training	X	X	-	X	-
CFC: home delivered meals	X	X	X	X	-
CFC: assistive technology	X	X	-	X	-
CFC: Accessibility adaptations	X	X	-	X	-
CFC: environmental assessments	X	X	X	X	-
CPAS and CFC: Supports Planning	X	X	X	X	-
ICS: case management	X	X	X	-	-
ICS: Medical Day Care	X	X	-	X	-
ICS: Family training	X	X	-	X	-
ICS: Assisted living	X	X	-	X	-
ICS: senior Center Plus	X	X	-	X	-
1915c: case management	-	X	-	-	-
1915c: certified Nursing Assistant/Home Health Aide	-	X	X	X	-
1915c: nursing (private duty) (21+ years of age)	X	X	X	X	-
1915c: Medical Day Care	-	X	-	-	-

Autism: Family leave (retainer day)	X	X	X	X	-
Autism: Residential habilitation (regular and intensive)	X	X	X	X	-
Autism: Intensive individual support services	X	X	X	X	-
Autism: Therapeutic integration (regular and intensive)	X	X	X	X	-
Autism: adult life planning	X	X	X	X	-
Autism: Respite care	X	X	X	X	-
Autism: family training	X	X	X	X	-
Autism: Environmental accessibility adaption	X	X	X	X	-
Brain Injury: Residential habilitation	X	X	X	X	-
Brain Injury: Day habilitation	X	X	X	X	-
Brain injury: Supported employment	X	X	X	X	-
Brain injury: Individual support services	X	X	X	X	-
Brain injury: medical Day Care	X	X	X	X	-
HCBS: case management	X	X	X	-	-
HCBS: Medical Day Care	X	X	-	X	-
HCBS: family training	X	X	-	X	-
HCBS: Assisted living	X	X	-	X	-
HCBS: senior Center Plus	X	X	-	-	-
Medical Day Care Waiver with associated services	-	X	-	-	-
Community Pathways and Community Supports waivers: Assistive technology and services	X	X	X	-	-
Community Pathways and Community Supports waivers: Behavioral support services	X	X	X	-	-
Community Pathways and Community Supports waivers: Career exploration	X	X	X	-	-
Community Pathways and Community Supports waivers: Community development	X	X	X	-	-
Community Pathways and Community Supports waivers: Day habilitation	X	X	X	-	-
Community Pathways and Community Supports waivers: Employment discovery and customization	X	X	X	-	-

Community Pathways and Community Supports waivers: Employment services	X	X	X	-	-
Community Pathways and Community Supports waivers: Environmental assessment	X	X	X	-	-
Community Pathways and Community Supports waivers: Environmental modification	X	X	X	-	-
Community Pathways and Community Supports waivers: Family and peer mentoring supports	X	X	X	-	-
Community Pathways and Community Supports waivers: Family caregiver training and empowerment	X	X	X	-	-
Community Pathways and Community Supports waivers: Housing support services	X	X	X	-	-
Community Pathways and Community Supports waivers: Individual and family directed goods and services	X	X	X	-	-
Community Pathways and Community Supports waivers: Medical Day Care	X	X	X	-	-
Community Pathways and Community Supports waivers: Nurse case management and delegation	X	X	X	-	-
Community Pathways and Community Supports waivers: Nurse consultation	X	X	X	-	-
Community Pathways and Community Supports waivers: Nurse health case management	X	X	X	-	-
Community Pathways and Community Supports waivers: Participant education, training and advocacy	X	X	X	-	-
Community Pathways and Community Supports waivers: Personal supports	X	X	X	-	-
Community Pathways and Community Supports waivers: Respite care services	X	X	X	-	-
Community Pathways and Community Supports waivers: Support broker services	X	X	X	-	-
Community Pathways and Community Supports waivers: Supported employment	X	X	X	-	-

Community Pathways and Community Supports waivers: Transportation	X	X	X	-	-
Community Pathways and Community Supports waivers: Vehicle modification	X	X	X	-	-
Community Pathways only: community living	X	X	X	-	-
Community Pathways only: live-in caregiver supports	X	X	X	-	-
Community Pathways only: Remote support services	X	X	X	-	-
Community Pathways only: Shared living	X	X	X	-	-
Community Pathways only: Support living	X	X	X	-	-
Community Pathways only: transition services	X	X	X	-	-
Family Supports: Assistive technology and services	X	X	X	-	-
Family Supports: Behavioral support services	X	X	X	-	-
Family Supports: Environmental assessment	X	X	X	-	-
Family Supports: Environmental modification	X	X	X	-	-
Family Supports: Family and peer mentoring supports	X	X	X	-	-
Family Supports: Family caregiver training and empowerment	X	X	X	-	-
Family Supports: Housing support services	X	X	X	-	-
Family Supports: Individual and family directed goods and services	X	X	X	-	-
Family Supports: Nurse case management and delegation	X	X	X	-	-
Family Supports: Nurse consultation	X	X	X	-	-
Family Supports: Participant education, training and advocacy	X	X	X	-	-
Family Supports: Personal supports	X	X	X	-	-
Family Supports: Respite care services	X	X	X	-	-
Family Supports: Support broker services	X	X	X	-	-
Family Supports: Transportation	X	X	X	-	-
Family Supports: Vehicle modification	X	X	X	-	-
Health-related services and targeted case management services provided to children when the services are specified in the child's Individualized Education Plan or Individualized Family Service Plan	-	X	-	-	-
EPSDT: Nursing services (Registered Nurse, Licensed Practical Nurse, Certified Nursing Assistant-Certified Medication Technician)	X	X	X	X	-

Autism: Intensive individual support services	-	X	-	-	-
Autism: adult life planning	-	X	-	-	-
Medical Day Care waiver with associated services(16+ years of age):	X	X	X	-	-
Community Pathways and Community Supports waivers: Nurse case management and delegation	-	X	-	-	-
HH: Registered Nurse (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X	X	-
HH: Registered Nurse (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X	-	-
HH: Home Health Aide (> 1 visit per day; > 4 hours of service per day; visit w/o skilled nursing)	X	X	X	X	-
HH: Home Health Aide (≤ 1 visit per day; ≤ 4 hours of service per day; visit w/ skilled nursing; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X	-	-
HH: Physical therapy (> 1 visit per day; ; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X	X	-
HH: Physical therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X	-	-
HH: Occupational therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate))	X	X	X	X	-
HH: Occupational therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X	-	-
HH: Speech therapy (> 1 visit per day; services rendered during a 30-day period in excess of the Medicaid NF rate)	X	X	X	X	-
HH: Speech therapy (≤ 1 visit per day; services rendered during a 30-day period that do not exceed the Medicaid NF rate)	X	X	X	X	-
Disposable Medical Supplies (> \$500.00)	X	X	X	X	-
Disposable Medical Supplies (≤ \$500.00)	-	X	X	X	-
Durable Medical Equipment (> \$1,000.00)	X	X	X	X	-
Durable Medical Equipment (≤ \$1,000.00)	-	X	X	X	-
Durable Medical Equipment rental (≤ 3 months)	X	X	X	X	-

Durable Medical Equipment rental (> 3 months)	-	X	X	X	-
Disposable Medical Equipment (w/o HCPCS)	X	X	X	X	-
Durable Medical Equipment (w/o HCPCS)	X	X	X	X	-
Oxygen (w/o HCPCS)	X	X	X	X	-