## **Benefits**



## **Original Medicare and Michigan Medicaid Medical Benefits**

- Medicare Parts A and B benefits
- Medicare Part D prescription drug benefits
- Michigan Medicaid benefits
- Long Term Services and Supports (LTSS) benefits
- Supplemental benefits

AmeriHealth Caritas VIP Care Plus **does not** charge deductible, coinsurance, or a copayment for Original Medicare and Michigan Medicaid Medical Benefits to the member. No premiums are paid by the member for these benefits.

PLAN NAME	MEDICARE PARTS A & B	MEDICARE PART D	MICHIGAN MEDICAID
Medicaid Michigan Department of Health and Human Services	NA	NA	$\checkmark$
Medicare Fee for Service or Medicare Advantage (MAPD)			Not applicable for non-dual Medicare beneficiaries
			FFS for dual eligible beneficiaries
AmeriHeatlh Caritas VIP Care Plus Medicare Medicaid Plan		$\checkmark$	$\checkmark$

- Ambulance Services
- Cardiac and Pulmonary Rehabilitation Services
- Catastrophic Coverage
- Chiropractic Care
- Dental Services
- Diabetes Program and Supplies
- Diagnostic Tests, X-Rays, Lab Services, and Radiology Services
- Doctor Office Visits
- Durable Medical Equipment
- Emergency Care
- Hearing Services
- Home Health Care
- Hospice Initial Consultation
- Inpatient Hospital Care
- Inpatient Mental Health Care

- Out-of Network Catastrophic Coverage
- Out-of-Network Initial Coverage
- Outpatient Mental Health Care
- Outpatient Rehabilitation
- Outpatient Services/Surgery
- Outpatient Substance Abuse Care
- Pharmacy
- LTC Pharmacy
- Mail Order Prescriptions
- Out-of-Network catastrophic Prescriptions
- Outpatient Prescription Drugs
- Podiatry
- Preventive Services and Wellness/Education
- Prosthetic Devices
- Skilled Nursing Facility
- Urgent Care

\*Exceptions may apply, see provider manual for full list of benefits.

\*\* Prior authorization may be required.

- Dental Services.
- Durable Medical Equipment.
- Family Planning Services.
- Home Health.
- Home and Community Based Services.
- Medical Services.

- Non Emergency Medical Transportation.
- Nursing Facility Care.
- Pharmacy Services (Tier 3)
- Prosthetics.
- Sexually transmitted infections screening and counseling.
- Vision care.

\*Exceptions may apply, see provider manual for full list of benefits.

\*\* Prior authorization may be required.

## Supplemental benefits:

- Meal benefit Limited to 2 meals/day with authorization.
- Fitness benefit through Silver Sneakers program.
- Mail order over the counter medications and supplies.
- Telemedicine
- 24/7 Nurse hotline.
- Free language translation line.
- **Covered by Medicare Fee for Service:**
- Hospice Services.
- Behavioral Health (PIHP)

