

AMENDMENT TO MEDICAID SUBSCRIBER CONTRACT



This Amendment will be effective October 1, 2009.

The following sections of the Medicaid Subscriber Contract are amended:

SECTION VIII COVERED SERVICES:

Section 8.1.1 is amended to state:

- 8.1 **PHYSICIAN SERVICES** (other than Mental Health Services) provided by, or under the direction of, the Member's Primary Care Physician, or provided by a Specialist Physician to whom the Member is Appropriately Referred, including:
- I. Services by a Podiatrist **for Members who are under the age of twenty-one (21) only**. No coverage for podiatry services for Members twenty-one (21) years of age or older.

Section 8.12 is deleted and restated in its entirety as follows:

8.12 HEARING AIDS

Benefits for a Hearing Aid(s) and hearing tests for fitting and performance evaluation of a Hearing Aid(s) **for Members under the age of twenty-one (21) only** when authorized, in advance, by the Member's Primary Care Physician and obtained from an Affiliated Provider.

Hearing Aids are not covered for Members twenty-one (21) years of age or older.

Section 8.17 is deleted and restated in its entirety as follows:

- 8.17 **VISION SERVICES for Members who are under the age of twenty-one (21) only** when authorized in advance by HPP and obtained from Affiliated Providers, Suppliers, or Specialist Physicians, including:
- A. Complete eye examination and refraction.
 - B. Corrective lenses (single vision, multi-focal, or cataract lenses).
 - C. Eyeglass frames (or contact lenses, but only if required to be provided by the Medicaid Program).
 - D. Repair or replacement of frames/lenses due to body growth, loss, or breakage when prior authorized.

Vision Services are not covered for Members twenty-one (21) years of age or older, except that services related to eye trauma and eye diseases (such as cataracts, glaucoma, diabetes-related eye disease) will be covered when authorized in advance by HPP and obtained from Affiliated Providers or Specialist Physicians.

COPAYMENT FOR VISION SERVICES

COPAYMENT

A Copayment will apply to office Visits for eye trauma and eye diseases for Members twenty-one (21) years of age or older.

\$2 per Visit

There will not be a Copayment for those Members under the age of twenty-one (21)

Section 8.20 is deleted and restated in its entirety as follows:

8.20 **CHIROPRACTOR OFFICE VISITS for Members under the age of twenty-one (21) only** when provided by Affiliated Chiropractors, and when authorized in advance by the Member's Primary Care Physician and/or HPP.

Chiropractor Office Visits/services are not covered for Members twenty-one (21) years of age or older.

Section 9.1.H is deleted and restated in its entirety as follows:

H. **Vision Services.** Benefits for Vision Services shall be limited to one (1) complete eye examination and refraction per Member under the age of twenty-one (21) every two (2) calendar years, unless deemed Medically Necessary more frequently, and one (1) complete pair of eyeglasses (frames and/or lenses) per Member under the age of twenty-one (21) every two (2) calendar years when new lenses are Medically Necessary. When a Member's frames and/or lenses are lost, stolen, or broken beyond repair, replacement eyeglasses are covered up to two (2) pairs of identical substitute eyeglasses per Member per calendar year for Members under the age of twenty-one (21). Coverage shall be provided only for Medically Necessary, non-deluxe frames and/or lenses determine by HPP to be eligible for reimbursement.