Pasport's EXTRA Benefits & Rewards To learn more and claim your reward, visit passporthealthplan.com or call (833) 986-0072.

What You	The Details	Who's Eligible?	The Value
Can Get			
	Complete your COVID vaccine series, including your booster shot if eligible to receive one. Subject to change.**>	<all 12+="" ages="" members=""></all>	<\$100>
	Complete your COVID vaccine series, including your booster shot if eligible to receive one. Subject to change**>.	<members 5-11="" age=""></members>	<\$25>
	Attend one postpartum visit 7-84 days after the birth of the baby.*	New Moms.	\$25 Gift Card
	Go to a prenatal visit during the first trimester or within 42 days of enrollment.*	Pregnant Moms 12 years & older.	Infant, Car or Booster Seat
	Have a yearly diabetic retinal eye exam.*	Members with Diabetes 18 - 75 years.	\$50 Gift card
	Complete a yearly HbA1c test.*	Members with Diabetes 18 - 75 years.	\$50 Gift card
	Have a yearly Mammogram.*	Females 50-74 years old.	\$25 Gift Card
	Have up to 6 well-child visits on time.	Birth - 3 years old.	\$10 per visit (Max \$60 Gift Card)
Healthy	Have an annual well-child visit.	4-17 years old.	\$10 Gift Card
Rewards	Get a Pap test.*	Females 21-64 years old.	\$25 Gift Card
	Get a chlamydia screening.*	Females 16-24 years old.	\$25 Gift Card
	Go to a follow-up visit within 7 days of an inpatient hospital stay (medical stays go to PCP; behavioral health stays go to behavioral health provider or PCP) (no limits).	All Members.	\$50 Gift Card
	Have an annual adult preventative screening visit.*	18 years and older.	\$25 Gift Card
	Complete an annual dental exam.*	All Members.	\$50 Gift Card
	Have a diagnosis of diabetes or high blood pressure.*	All Members with Diabetes or High Blood Pressure.	Blood Pressure Cuff
	Complete your Health Risk Assessment (HRA) every year.*	All members.	\$25 Gift Card
	Complete Diabetes Self Management Education and Support (DSMES) classes.*	All Members with Diabetes Type 1 or Type 2.	\$25 Gift Card
Free Phone/ Data	A FREE cellphone with Unlimited Talk & Text plus 4.5GB of data, free every month.	All members 18 years and older.	Free - No Cost to You!
School & Sports Physicals	Get a free sports or school physical every year.	6-18 years old.	Free annual physical

What You Can Get	The Details	Who's Eligible?	The Value
Adult Eyeglasses or Contacts	Visit a network provider to get \$100 off a pair of eyeglasses or contacts every 24 months.	Members 21 years and older. *Members 20 years and under, see "Vision Children Under 21" below.	Up to \$100
Obesity & Weight Watchers	Get up to 13 weeks of Weight Watchers digital program free. Members must have approval from their doctor, an email address, and a computer or smart device with internet access.	Members 18 years and older who are approved by their doctor and meet BMI requirements.	\$40
Food Care	A gift card to either Amazon, Wal-Mart, Target, Kroger or Dollar General, one per year.	All members - one gift card per household.	\$25
Blood Pressure Cuff	One free blood pressure cuff per year.	All members with diabetes or high blood pressure.	Up to \$30
Home colon cancer screening kit	One home colon cancer screening kit per year.	All members ages 45-75.	\$25
GED	Vouchers to take the GED test for free at testing centers.	18 years and older.	\$120
	Gift card for passing the exam.	18 years and older.	\$50
Asthma	Members who sign up and complete the 3-month Asthma Disease Management Breathe with Ease® Program receive an allergy-free pillowcase and mattress cover.	Mattress / Pillow: All members in the Asthma Disease Management program.	Mattress Cover: \$60 Pillow Covers: \$20
	Passport will provide a second inhaler at no extra cost to children under 18 who are prescribed an inhaler.	2nd Inhaler: Under 18 years old.	Second Inhaler: Free for members
	For Members in Care Man	agement	
Dentures	Get \$300 off a partial set or \$700 off a full set of dentures every year.	Members in our care management program.	Up to \$700
Hearing Aids	Get \$900 off a pair of hearing aids every year.	Members 21 years and older. *Members 20 years and under, see "Hearing Services for Children Under 21."	Up to \$900
Emergency Eviction Prevention Repair Funds	Up to \$750 in emergency eviction prevention repair funds.	Members in our care management program.	Up to \$750
Gas Cards or Bus Passes	A gas card or a bus pass, once per year.	Members in our care management program.	\$25 gift card

All Extra Benefits and Rewards may have additional exclusions or supply limits. Benefits are subject to change. Members must have Passport Health Plan by Molina Healthcare Medicaid as their primary insurance at the time of service. *Limited to one per member per year unless otherwise specified. **Limited to one gift card per member.

Your Benefits & Rewards

Take a look at some of the **great** benefits you have with Passport Health Plan by Molina Healthcare. As always, you pay \$0!

\$0 Copays!



Your Benefits	Extra Details
Allergy Services	Covers both adult and children
Ambulatory Surgical Centers	Does not cover cosmetic surgery.
Autism Spectrum Disorders	Age 21 and under
Cervical and Vaginal Cancer Screening (Pap tests, pelvic exams)	1 per year (unless ordered by provider)
Chemotherapy	
Chiropractic Care (limits may apply)	26 visits per 12-month period
Commission for Children with Special Health Care Needs	Limited to children who are eligible for the Kentucky Commission for Children with Special Health Care Needs



Your Benefits	Extra Details
Dental Services	Covers: Preventive services Diagnostic services 1 oral exam every 12-months 2 oral exams for members under 21 if included with a cleaning 1 cleaning every 12-months for members 21 and older 2 cleanings every 12-months for members under 21 1 set of X-rays every 12-months Extractions and fillings Oral surgery Orthodontic and prosthodontic services
Dialysis End-Stage Renal Disease (ESRD)	Services and procedures that promote and help the functioning of the kidneys and related organs
Durable Medical Equipment	
Early & Periodic Screening, Diagnoses and Treatment (EPSDT) Services (health checks for children under age 21)	 1 neonatal exam (right after the baby is born) 1 exam at 1, 2, 4, 6, 9, 12, 15, 18, and 24 months 1 exam each year for children ages 3 to 20
Emergency Room	
Emergency Ambulance and Air Transportation	Basic life support (BLS)Advanced life support (ALS) ambulance services
Family Planning	Provided at routine visits or family planning clinics
First Steps Services	Services are available to children from birth to age 3. Children must have a developmental delay or a physical or mental condition(s) related to a developmental delay.
Hearing Services for Children Under 21	1 complete hearing evaluation per calendar year
HIV Screening	 Screenings for: Hearing aids Pregnant women Those who have an increased risk for the infection Anyone who asks for the test
Hospice	
Inpatient Hospital Services	

Your Benefits	Extra Details
Inpatient Provider & Surgeon Services	Cosmetic surgery is not covered (except for post-mastectomy reconstructive surgery)
Inpatient Mental Health & Substance Use Disorder	
Immunizations	Includes: Adults and children Flu Pneumonia Hepatitis B
Lab and Radiology Services (by provider or lab)	
Maternity Services	
Non-emergency Ambulance Stretcher Services	Used when other types of transportation could cause danger to your health (see Member Handbook section on Transportation)
Nursing Facility Services	Includes provider services
Nutritional Counseling	
OB Ultrasounds	2 every 9-months unless your provider orders more (see family planning in Member Handbook)
Occupational Therapy (OT)	Up to 20 visits per calendar year
Outpatient Hospital Services	Does not cover cosmetic surgery (except for post-mastectomy reconstructive surgery)
Outpatient Mental Health & Substance Use Disorder	Per visit
Prenatal and Postnatal Care	
Prescription Drugs	Unlimited prescriptions per month
Physical Therapy	Up to 20 visits per calendar year.
Provider Services (PCPs, specialists, provider assistants, nurse practitioners, nurse midwives)	 Includes: Specialists Provider assistants Nurse practitioners Nurse midwives Office visits Medical surgical care and consultation Diagnosis and treatment

Your Benefits	Extra Details
Podiatry Services	Routine foot care not covered except for some conditions that need professional supervision
Preventative Care	Wellness visits
Private Duty Nursing	Allows for 2,000 hours per year
Prosthetic & Orthotic Devices	
Psychiatric Residential Treatment Facilities	For children 6 to 21 Intensive facility-based care alternatives to hospitals
Radiation Therapy	
Rural health clinic (RHC), Federally Qualified Health Center (FQHC), & Primary Care Center (PCC)	
Specialized Children's Services Clinics	Sexual abuse medical exams are covered for members under 18 when medically necessary
Speech Therapy	Up to 20 visits per calendar year
Targeted Care Management Services	Behavioral health services that include at least 4 sessions in 1 month including a minimum of: • 1 face-to-face contact • 1 face-to-face contact with parent, family member, guardian or other person who has custody or supervision of the member • 2 additional contacts face-to-face or by phone
Telehealth	Must use a provider in the Passport network
Tobacco Cessation	
Transplant Services	
Urgent Care Visits	
Vision Adults over 21	 1 eye exam each calendar year *See Passport's EXTRA Benefits & Rewards section for details on coverage for adult eyeglasses
Vision Children under 21	 1 eye exam each calendar year 1 pair of eyeglasses per year, or a second pair if the first pair is broken or if the prescription changes

