



Marketplace National Regional Benefit Interpretation Document

Applicable State California, Florida, Idaho, Illinois, Kentucky, Michigan, Mississippi, New Mexico, Ohio, South Carolina, Texas, Utah, Washington, Wisconsin This policy addresses services or costs associated with a non-covered service. Covered benefits are listed in three (3) Sections - A, B and C. All services must be medically necessary. Each benefit plan contains its own specific provisions for coverage, limitations and exclusions as stated in the member's Evidence of Coverage (EOC)/Schedule of Benefits (SOB). If there is a discrepancy between this policy and the member's EOC/SOB, the member's EOC/SOB provision will govern. A. FEDERAL/STATE MANDATED REGULATIONS Note: The most current federal/state mandated regulations for each state can be found in the links below. None B. STATE MARKET PLAN ENHANCEMENTS None C. COVERED BENEFITS IMPORTANT NOTE: Covered benefits are listed in Sections A, B and C. Always refer to Sections A and B for additional covered benefits not listed in this Section. Refer to the member's Evidence of Coverage (EOC) and Schedule of Benefits (SOB) to determine coverage eligibility. ALL STATES: Hyperbaric payagen therapy covered w/PA for wound treatment	Benefit Name	SERVICES/COMPLICATIONS RELATED TO NON-COVERED SERVICES				
Covered benefits are listed in three (3) Sections - A, B and C. All services must be medically necessary. Each benefit plan contains its own specific provisions for coverage, limitations and exclusions as stated in the member's Evidence of Coverage (EOC)/Schedule of Benefits (SOB). If there is a discrepancy between this policy and the member's EOC/SOB, the member's EOC/SOB provision will govern. A. FEDERAL/STATE MANDATED REGULATIONS Note: The most current federal/state mandated regulations for each state can be found in the links below. None B. STATE MARKET PLAN ENHANCEMENTS None C. COVERED BENEFITS IMPORTANT NOTE: Covered benefits are listed in Sections A, B and C. Always refer to Sections A and B for additional covered benefits not listed in this Section. Refer to the member's Evidence of Coverage (EOC) and Schedule of Benefits (SOB) to determine coverage eligibility. ALL STATES:	Applicable State	•				
Type batte oxygen therapy covered w/17/101 would treatment	Benefit Definition	Covered benefits are listed in three (3) Sections - A, B and C. All services must be medically necessary. Each benefit plan contains its own specific provisions for coverage, limitations and exclusions as stated in the member's Evidence of Coverage (EOC)/Schedule of Benefits (SOB). If there is a discrepancy between this policy and the member's EOC/SOB, the member's EOC/SOB provision will govern. A. FEDERAL/STATE MANDATED REGULATIONS Note: The most current federal/state mandated regulations for each state can be found in the links below. None B. STATE MARKET PLAN ENHANCEMENTS None C. COVERED BENEFITS IMPORTANT NOTE: Covered benefits are listed in Sections A, B and C. Always refer to Sections A and B for additional covered benefits not listed in this Section. Refer to the member's Evidence of Coverage (EOC) and Schedule of Benefits (SOB) to determine coverage eligibility.				





Molina and Passport will cover medically necessary services directly related to non-covered health care services when complications exceed routine follow-up care such as life- threatening complications.

Covered Benefits would be provided through out other Benefit Interpretation Policies. This Benefit Policy is to address any other items that are not covered for each state. Please refer to the not covered section.

D. NOT COVERED

Refer to the member's Evidence of Coverage (EOC) and Schedule of Benefits (SOB) to determine coverage eligibility.

Note: This is not an all-inclusive list of non-covered services for Marketplace

NON-COVERED SERVICES

CALIFORNIA, FLORIDA, IDAHO, ILLINOIS, KENTUCKY, MICHIGAN, NEW MEXICO, OHIO, SOUTH CAROLINA, TEXAS, UTAH, WASHINGTON:

Molina and Passport will not cover or pay for any expenses incurred for the following:

- Animal-based therapy, including hypnotherapy
- Auditory integration training
- Chelation therapy
- Child-care fees
- Claims that have been determined by MHI to be fraudulent
- Costs for a facility or location or use of a facility or location when treatment, services, or Evidence-Based Therapy are provided outside of the Member's home
- Cranial sacral therapy
- Custodial care
- Treatment rendered by a parent or legal guardian who is otherwise considered a Qualified Provider, Qualified Supervising Provider, Qualified Therapist, Qualified Professional, or Qualified Paraprofessional when the treatment is rendered to his or her own children
- Travel time by Qualified Providers, Qualified Supervising Providers, Qualified Professionals, Qualified Therapists, or Qualified Paraprofessionals

MISSISSIPPI:

Molina will not cover or pay for any expenses incurred for the following:

- Animal-based therapy, including hypnotherapy
- Auditory integration training



- Chelation therapy
- Child-care fees
- Claims that have been determined by Us to be fraudulent
- Costs for a facility or location or use of a facility or location when treatment, services, or Evidence-Based Therapy are provided outside of the Member's home
- Cranial sacral therapy
- Custodial care
- Treatment rendered by a parent or legal guardian who is otherwise considered a Qualified Provider, Qualified Supervising Provider, Qualified Therapist, Qualified Professional, or Qualified Paraprofessional when the treatment is rendered to his or her own children
- Travel time by Qualified Providers, Qualified Supervising Providers, Qualified Professionals, Qualified Therapists, or Qualified Paraprofessionals

WISCONSIN:

Non-Covered Services related to Autism Spectrum Disorder:

Molina will not cover or pay for any expenses incurred for the following:

- Acupuncture
- Animal-based therapy, including hypnotherapy
- Auditory integration training
- Chelation therapy
- Child-care fees
- Claims that have been determined by Us to be fraudulent
- Costs for a facility or location or use of a facility or location when treatment, services, or Evidence-Based Therapy are provided outside of the Member's home
- Cranial sacral therapy
- Custodial care
- Special diets or supplements
- Therapy, treatment, or services provided to a Member who is residing in a residential treatment center, inpatient treatment facility, or day treatment facility
- Treatment rendered by a parent or legal guardian who is otherwise considered a Qualified Provider, Qualified Supervising Provider, Qualified Therapist, Qualified Professional, or Qualified Paraprofessional when the treatment is rendered to his or her own children
- Travel time by Qualified Providers, Qualified Supervising Providers, Qualified Professionals, Qualified Therapists, or Qualified Paraprofessionals



NON-HEALTHCARE ITEMS AND SERVICES CALIFORNIA:

Non-Healthcare Items and Services: Molina does not cover services that are not healthcare services, for example:

- Teaching manners and etiquette
- Teaching and support services to develop planning skills such as daily activity planning and project or task planning
- Items and services that increase academic knowledge or skills, teaching and support services to increase intelligence
- Academic coaching or tutoring for skills such as grammar, math, and time management
- Teaching Members how to read, if they have dyslexia
- Educational testing
- Teaching art, dance, horse riding, music, play or swimming, unless medically necessary for treatment of a mental health or substance use disorder.
- Teaching skills for employment or vocational purposes
- Vocational training or teaching vocational skills
- Professional-growth courses
- Training for a specific job or employment counseling
- Examinations related to job, athletic (sports physicals), or recreational performance

FLORIDA, IDAHO, ILLINOIS, KENTUCKY, MICHIGAN, MISSISSIPPI, OHIO, SOUTH CAROLINA, UTAH, WASHINGTON, WISCONSIN:

Non-Healthcare Items and Services: Molina and Passport do not cover services that are not healthcare services, for example:

- Teaching manners and etiquette
- Teaching and support services to develop planning skills such as daily activity planning and project or task planning
- Items and services that increase academic knowledge or skills, teaching and support services to increase intelligence
- Academic coaching or tutoring for skills such as grammar, math, and time management
- Teaching Members how to read if they have dyslexia
- Educational testing
- Teaching art, dance, horse riding, music, play or swimming
- Teaching skills for employment or vocational purposes
- Vocational training or teaching vocational skills
- Professional-growth courses
- Training for a specific job or employment counseling



- Aquatic therapy and other water therapy
- Examinations related to job, athletic (sports physicals), or recreational performance

NEW MEXICO:

Non-Healthcare Items and Services: Molina does not cover services that are not healthcare services, for example:

- Teaching manners and etiquette
- Teaching and support services to develop planning skills such as daily activity planning and project or task planning
- Items and services that increase academic knowledge or skills, teaching and support services to increase intelligence
- Academic coaching or tutoring for skills such as grammar, math, and time management
- Teaching Members how to read, if they have dyslexia
- Educational testing
- Teaching art, dance, horse riding, music, play or swimming
- Teaching skills for employment or vocational purposes
- Vocational training or teaching vocational skills
- Professional-growth courses
- Training for a specific job or employment counseling
- Aquatic therapy and other water therapy
- Examinations related to job, athletic (sports physicals), or recreational performance
- Personal convenience items

TEXAS:

Non-Healthcare Items and Services: Molina does not cover services that are not healthcare services, for example:

- Academic coaching or tutoring for skills, such as grammar, math and time management
- Aquatic therapy and other water therapy
- Educational testing
- Items and services that increase academic knowledge or skills
- Professional-growth courses
- Teaching and support services to develop planning skills such as daily activity planning and project or task planning
- Teaching and support services to increase intelligence
- Teaching art, dance, horse riding, music, play or swimming
- Teaching manners and etiquette
- Teaching skills for employment or vocational purposes
- Teaching the Member how to read, whether or not they have dyslexia



- Training for a specific job or employment counseling
- Vocational training or teaching vocational skills

SERVICES RELATED TO A NON-COVERED SERVICE CALIFORNIA:

Services Related to a Non-Covered Service When a service is not covered, all services related to the non-Covered Service are not covered. This exclusion does not apply to services Molina and Passport (KY) would otherwise cover to treat complications of the non-Covered Service. Molina and Passport (KY) cover all Medically Necessary basic health services for complications for a non-Covered Service.

FLORIDA:

Services Related to a Non-Covered Service When a service is not covered, all services related to the non-Covered Service are not covered. This exclusion does not apply to services Molina and Passport (KY) would otherwise cover to treat complications of the non-Covered Service. Molina and Passport (KY) cover all Medically Necessary basic health services for complications for a non-Covered Service unless stated otherwise in this Agreement or another Benefit Interpretation Policy. If a Member later suffers a life-threatening complication such as a serious infection, this exclusion will not apply. Molina and Passport would cover any services that Molina or Passport would otherwise cover to treat that complication.

IDAHO, ILLINOIS, KENTUCKY, MICHIGAN, MISSISSIPPI, NEW MEXICO, OHIO, TEXAS, UTAH, WASHINGTON, WISCONSIN:

Services Related to a Non-Covered Service When a service is not covered, all services related to the non-Covered Service are not covered. This exclusion does not apply to services Molina and Passport (KY) would otherwise cover to treat complications of the non-Covered Service. Molina and Passport (KY) cover all Medically Necessary basic health services for complications for a non-Covered Service. If a Member later suffers a life-threatening complication such as a serious infection, this exclusion will not apply. Molina and Passport would cover any services that Molina or Passport would otherwise cover to treat that complication.

SOUTH CAROLINA:

Services Related to a Non-Covered Service: When a service is not covered, all services related to the non-Covered Service are not covered. This exclusion does not apply to services Molina would otherwise cover to treat complications of the non-Covered Service. Molina covers all Medically Necessary basic health services for complications for a non-Covered Service.





For example, if a Member has a non-covered bariatric surgery or cosmetic surgery, Molina will not cover services the Member receives in preparation for the surgery or for follow-up care. If the Member later suffers a complication such as a serious infection, this exclusion will not apply, and Molina would cover any services that would otherwise be covered as Medically Necessary to treat that complication.

TRAVEL AND LODGING

ALL STATES:

Travel and Lodging Expenses: Travel and lodging expenses are not covered. Molina and Passport may pay certain expenses that Molina or Passport preauthorizes in accordance with Molina or Passports' travel and lodging guidelines. Molina and Passport travel and lodging guidelines are available from Member Services.

F.				

See Glossary

F. POLICY HISTORY/REVISION INFORMATION

Date	Action/Description

Procedure Codes (Internal Use Only)

Coding Disclaimer: Codes listed in this policy are for reference purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement. Coverage is determined by the benefit document. Molina adheres to Current Procedural Terminology (CPT®), a registered trademark of the American Medical Association (AMA). All CPT codes and descriptions are copyrighted by the AMA; this information is included for informational purposes only. Providers and facilities are expected to utilize industry standard coding practices for all submissions. When improper billing and coding is not followed, Molina has the right to reject/deny the claim and recover claim payment(s). Due to changing industry practices, Molina reserves the right to revise this policy as needed.

Prior Authorization

For the MHI PA Matrix, if a code is NOT listed, it could EITHER be:

a. Covered and No PA Required





HEALITICAKE						
	b. Not Covered You cannot use the MHI PA Matrix to make coverage determinations. PA Lookup Tool					
Approval	Departments	Product	CIM	Clinical		
				Management		
	Date	12/17/2021	3/31/2022	11/30/2021		
	Revised (for	12/13/2022		12/13/2022		
	1/1/2023)					