

Miami Children's Covered Services

The following details all expanded benefits available to Miami Children's Health Plan Medicaid members.
For more information please contact Miami Children's at (844)-243-5188 or visit
MiamiChildrensHealthPlan.com.

Miami Children's Health Plan provides services in the following Regions: 9 and 11

MMA EXPANDED BENEFITS

For more information on these benefits, contact Miami Children's Health Plan
Member Services Department at (844)-243-5187

Service	Description (including limits)	Prior Authorization Required	Phone Number
General Expanded Benefits			
Circumcision (newborns only)	One per lifetime for infants up to 28 days old	No prior authorization is required	
Home Delivered Meals	Up to ten (10) meals following an enrollee's discharge from a hospital or nursing facility; benefit is limited to four hospital nursing facility admissions per year	Prior authorization is required	(844)-824-8768
Meal Stipend (available for long distance medical appointment day-trips)	\$100 per day for up to 21 days for enrollees and their families. Includes up to two (2) meals per day. This benefit is covered only if traveling greater than 100 miles from enrollee's home.	Prior authorization is required	(877)-611-3446
Over-the-Counter Benefit	\$25/month to spend on an approved list of products	No prior authorization is required	

ADDRESS

5959 NW 7th Street,
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ProviderServices@MiamiChildrensHealthPlan.com

**MIAMI CHILDREN'S
HEALTH PLAN™**
Florida's Family Health Plan

Service	Description (including limits)	Prior Authorization Required	Phone Number
Adult Expanded Benefits			
Chiropractic Services	4 established patient visits per year, in addition to the state benefit of 24	No prior authorization is required	
Computerized Cognitive Behavioral Therapy	Unlimited visits for health and behavior assessment and re-assessment; individual, group, and family (with or without the patient present) health and behavior intervention	No prior authorization is required	
Hearing Services	The following services are provided 1 per every 2 years: assessment for hearing aids, hearing aid fitting/checking, hearing aid monaural in ear, behind ear hearing aid, hearing aid dispensing fee, in ear binaural hearing aid, behind ear binaural hearing aid, dispensing fee, behind ear cros hearing aid, cros hearing aid dispensing fee, behind ear bicros hearing aid, dispensing fee bicros, and hearing evaluation	No prior authorization is required for hearing assessments; Hearing Aids require prior authorization	
Occupational Therapy	One evaluation and one re-evaluation per year, and up to 7 therapy treatment units per week	No prior authorization is required for initial evaluation Prior authorization is required for subsequent visits thereafter	

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Physical Therapy	One evaluation and one re-evaluation per year, and up to 7 therapy treatment units per week	No prior authorization is required for initial evaluation Prior authorization is required for subsequent visits thereafter	
Prenatal Services	Rental of a hospital grade breast pump, one per year with prior authorization; rental of a breast pump, one per two years; 14 antepartum visits for low-risk pregnancies; 18 antepartum visits for high-risk pregnancies; 3 postpartum visits within 90 days following delivery	Prior authorization is required for Hospital Grade Breast Pump No prior authorization required for Breast Pump rental	(855)-481-0505
Primary Care Services	Unlimited outpatient visits	No prior authorization is required	
Respiratory Therapy	One initial evaluation and one re-evaluation per year; one respiratory therapy visit per day	No prior authorization is required for initial evaluation Prior authorization is required for subsequent visits thereafter	
Speech Therapy	One evaluation and re-evaluation per year; one evaluation of oral an pharyngeal swallowing function per year; up to 7 therapy treatment units per week; one AAC initial evaluation and one AAC re-evaluation per year; up to four 30-minute AAC fitting, adjustment, and training sessions per year	No prior authorization is required for initial evaluation Prior authorization is required for subsequent visits thereafter	(844)-824-8768

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Vaccine – Influenza	One vaccination per enrollee per year	No prior authorization is required	
Vaccine – Pneumonia	Pneumococcal vaccines for enrollees 21+...1 vaccine every 5 years	No prior authorization is required	
Vaccine – Shingles	Based on CDC ACIP guidelines for age 21 and over (2 doses, 2 to 6 mos apart. Max total 2 per member lifetime)	Yes, for enrollees ages 18-49 due to limited risk factors No, for enrollees ages 50 and older	(844)-824-8768
Vision Services	1 pair of frames per year, one eye exam per year. The following contact lenses are dispensed in a 6-month supply with a prescription: PMMA, toric or prism ballast, per lens; gas permeable, toric, prism ballast, per lens; gas permeable, extended wear, per lens, hydrophilic, spherical, per lens, hydrophilic, toric, or prism ballast, per lens, hydrophilic extended wear, per lens; contact lens, other type	No prior authorizations are required for vision services	
Waived Copayments	All services that have a copayment requirement in accordance with Rule 59G-1.056, FAC	Not Applicable	
CVS Discount Program	20% discount off certain OTC items – CVS brands only	No prior authorization is required	

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<p>Home Health Nursing/Aide Services</p>	<ul style="list-style-type: none"> • Home health aide or certified nurse assistant, providing care in the home; per hour. • Nursing care, in the home; by a licensed practical nurse, per hour • Nursing care, in the home; by a licensed practical nurse, per hour • Personal Care Ser Per 15 Min • Personal Care Services, Per Diem • Home Health Aide Or Certified Nursing Aide, Per Visit • Registered Nurse Home Care, Per Diem • Licensed Practical Nurse, Home Care, Per Diem 	<p>Prior authorization is required</p>	<p>(855)-481-0505</p>
<p>Prenatal Vaccine – Tdap</p>	<p>Tetanus diphtheria toxoids acellular pertussis vaccine (Tdap) intramuscular</p>	<p>No prior authorization is required</p>	
<p>Cellular Phone Service</p>	<p>1 cellphone; 350 minutes; unlimited text messages; 3 GB data; 1 per household every 2 years</p>	<p>No prior authorization is required</p>	

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Medication Assisted Treatment	Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)	Prior authorization is required	(888)-710-2313
Medically Related Home Care Services	2 carpet cleanings per year for adults in Asthma Disease program	Prior authorization is required	(844)-824-8768
Therapy – Art	Activity therapy, such as music, dance, art, or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)	Prior authorization is required	(844)-824-8768
Therapy – Pet	Activity therapy, such as music, dance, art, or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)	Prior authorization is required	(844)-824-8768

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COVERED HEALTH MANAGEMENT PROGRAMS

Miami Children's Health Plan offers programs to help members access care and learn how to manage health conditions, including case management. The following are health management programs available to members. For more information please contact Miami Children's Health Plan at (844)-243-5188 or visit MiamiChildrensHealthPlan.com.

Program Name	Description	Contact Information
Complex Care Program	Program for Pediatrics and Adults that focuses on advances illness and/or multiple comorbid disease states	(844)-243-5187
Condition Care Health Education	Program for Pediatrics and Adults that focuses on a specific disease state and provides education	(844)-243-5187
Diabetes Self-Management Education	Available to members with Type 1 diabetes	(844)-243-5187
Maternity Care	Program for expectant mothers to ensure access to prenatal care and education	(844)-243-5187
Smoking Cessation	Healthy Behavior program providing a combination of medication and counseling to help the member quit smoking (90-120 day program)	(844)-243-5187
Substance Use Recovery Program	Healthy Behavior program focusing on addressing needs of members with an existing substance use issue or diagnosis (90-120 day program)	(844)-243-5187

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Transitional Care Program	Program focused on reducing avoidable readmissions for members at high risk of readmission from an acute facility	(844)-243-5187
Weight Management	Healthy Behavior program focusing on weight management, healthy diet, and exercise led by a Health Educator (90-120 day program)	(844)-243-5187
Right Care Right Time	Emergency Room diversion program to educate members on appropriate levels of care, connect members to primary care, and prevent avoidable ER utilization	(844)-243-5187
Special Health Care Needs (SHCN)	Care management program to address individuals with special health care needs to include Early Intervention Services, Medical Foster Care, and other unique healthcare needs	(844)-243-5187
Catastrophic Care	Program focused on managing members with complex healthcare needs. The focus is on stabilizing members and their disease process through coordination with primary care and required specialist to encourage appropriate utilization and optimal healthcare outcomes.	(844)-243-5187

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