

## **Essential Health Benefits for Purposes of Determining Annual and Lifetime Dollar Maximums**

The Affordable Care Act defines essential health benefits to include at least the following general categories and items and services covered within the categories:

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services, including behavioral health treatment
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care

### **BCBSIL's Determination**

Absent contrary regulatory guidance, BCBSIL believes that certain items and services in the following categories constitute essential health benefits:

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| <ul style="list-style-type: none"> <li>• Allergy</li> <li>• Ambulance</li> <li>• Ambulatory patient services</li> <li>• Chiropractor rendering medical services</li> <li>• CT, PET, MRI, Nuclear Medicine</li> <li>• Coordinated Home Care</li> <li>• Diabetic Management (medical)</li> <li>• Durable Medical Equipment</li> <li>• Emergency Services</li> <li>• Hearing &amp; Vision Test</li> <li>• Home Health Care</li> <li>• Hospitalization</li> <li>• Hospice</li> <li>• Human Organ Transplants</li> <li>• Infertility - diagnosis and treatment</li> </ul> | <ul style="list-style-type: none"> <li>• Maternity and newborn care</li> <li>• Mental Health and substance abuse services</li> <li>• Occupational Therapy</li> <li>• Pediatric services</li> <li>• Physical Therapy</li> <li>• Prescription Drugs</li> <li>• Preventive Care</li> <li>• Private Duty Nursing</li> <li>• Prosthetics</li> <li>• Rehabilitative and habilitative services and devices</li> <li>• Skilled Nursing Facility</li> <li>• Speech Therapy</li> <li>• Surgery</li> <li>• TMJ</li> </ul> |
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This information is for informational purposes only, does not constitute legal or other advice, and should not be relied upon to determine coverage. BCBSIL's determination as to essential health benefits is for purposes of addressing annual and lifetime dollar maximums and is not exhaustive. Federal regulatory agencies are expected to issue regulations on essential health benefits. Therefore, BCBSIL's determination as to essential health benefits is subject to change.



**Essential Health Benefits for Purposes of Determining  
Annual and Lifetime Dollar Maximums**

<b>Service being rendered</b>	<b>Is service considered an Essential Health Service?</b>
<b>CHIROPRACTIC</b>	
Chiropractic medical services	Yes. No calendar year dollar or lifetime dollar maximums on medical services (such as routine office visits) provided by a chiropractor
Chiropractic muscle manipulation	No. If covered, current dollar maximums can still apply
<b>DIABETIC SERVICES</b>	
Diabetic Management (medical)	Yes. No calendar year dollar or lifetime dollar maximums
Diabetic Mgmt Education	No (based on state mandates, if applicable). If covered, current dollar maximums can still apply
<b>EQUIPMENT, ETC</b>	
Durable Medical Equipment	Yes. No calendar year dollar or lifetime dollar maximums
Orthotics	No. If covered, current dollar maximums can still apply
Prosthetics	Yes. No calendar year dollar or lifetime dollar maximums
Wigs	No. If covered, current dollar maximums can still apply
<b>HEARING AND VISION</b>	
Hearing Aid Appliance	No. If covered, current dollar maximums can still apply
Hearing Test	Yes. No calendar year dollar or lifetime dollar maximums.
Vision Appliances (frames/lenses)	No. If covered, current dollar maximums can still apply
Vision Test	Yes. No calendar year dollar or lifetime dollar maximums.
<b>INFERTILITY</b>	
Infertility Diagnosis & Treatment	Yes. No calendar year dollar or lifetime dollar maximums
Infertility – Artificial Reproduction Technology	No. If covered, current dollar maximums can still apply
<b>LIFESTYLE MANAGEMENT</b>	
Nutritional Counseling	No. If covered, current dollar maximums can still apply
Obesity Diagnosis & Treatment	Yes. Healthy diet counseling and obesity screening/counseling is covered at 100% under preventive care provision
Obesity Surgery	Yes. No calendar year dollar or lifetime dollar maximums. Please refer to medical policy for specific coverage details
Smoking Cessation Counseling	Yes. Covered at 100% under preventive care provision (Note: Prescription drugs not covered at 100%)
Hospice	Yes. No calendar year dollar or lifetime dollar maximums

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**Essential Health Benefits for Purposes of Determining Annual and Lifetime Dollar Maximums, continued**

<b>NURSING/HOME HEALTH</b>	
Coordinated Home Care	Yes, may include limit on number of visits but not dollars
Private Duty Nursing	Yes. May include limit on number of visits but not dollars
Skilled Nursing Facility	Yes. May include limit on number of days but not dollars
<b>THERAPIES</b>	
Occupational Therapy	Yes. May include limit on number of visits but not dollars
Physical Therapy	Yes. May include limit on number of visits but not dollars
Speech Therapy	Yes. May include limit on number of visits but not dollars
<b>TRANSPLANTS</b>	
Human Organ Transplants	Yes. No calendar year dollar or lifetime dollar maximums
Travel/Meals/Lodging	No (current IRS per diems allowances can still apply)
<b>OTHER MEDICAL SERVICES</b>	
Acupuncture	No. If covered, current dollar maximums still apply
Ambulance	Yes. No calendar year dollar or lifetime dollar maximums
Autism Spectrum Disorder	Yes. No calendar year dollar or lifetime dollar maximums, although maximums on ABA services can still apply. Please refer to medical policy for specific coverage details.
Bereavement counseling	Yes. No calendar year dollar or lifetime dollar maximums
Naproathic Services	No. If covered, current dollar maximums can still apply
Prescription Drugs	Yes. No calendar year dollar or lifetime dollar maximums
TMJ	Yes. No calendar year dollar or lifetime dollar maximums

**Note: The Affordable Care Act and regulations prohibit annual limits on the dollar value of essential health benefits generally, but allow certain restricted annual limits with respect to essential health benefits for plan years (in the individual market, policy years) beginning before January 1, 2014. Grandfathered individual market policies are exempted from this provision. Federal regulations and guidance provide for a waiver program with respect to restricted annual limits.**

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