

Welcome to Medical Assistance

Here are some helpful tips on using Medical Assistance:

Be sure to carry your ACCESS card with you at all times. When you go to get health care services, please show all of your insurance cards, including your ACCESS card.

If you need a new ACCESS card, call: 1-877-395-8930. If you live in Philadelphia, call: 1-215-560-7226.

There is a limit to the types of services you can get. Please talk with your provider or call 1-800-537-8862, Option #2, #3, #2 about these limits.

For more information about what is included in these services, call: 1-800-537-8862, Option #2, #3, #2.

You may get these services*:

- Ambulance Services
- Ambulatory Surgical Center (ASC)
- Case Management
- Chiropractic Services
- Clinic Services
- Dental Services
- Drug and Alcohol Services
- Durable Medical Equipment (Includes Orthotics and Prosthetics)
- Family Planning Services and Supplies
- Hospice Services
- Laboratory Tests
- Maternity Services by a Physician, Certified Nurse Midwives, Birth Centers, and Home Visits by a Nurse
- Medical Supplies
- Mental Health Services
- Optometrist Services
- Podiatrist Services
- Prescription Drugs
- Radiology Services (X-Rays, MRIs, CTs)
- Renal Dialysis Services
- Nursing Facility Services
- Non-Emergency Medical Transportation (only to and from covered services)

* Inpatient services are not covered.

Your Medical Assistance benefit package is called **Adult** and is for people who are 21 and older.

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You may get these services:

- Certified Registered Nurse Practitioner Services
- Chiropractic Services
- Clinic Services
- Crisis Services
- Contact Lenses (Limited to individuals with aphakia)
- Dental Care Services
- Durable Medical Equipment
- Emergency Room/Ambulance Services
- Eyeglass Frames (Limited to individuals with aphakia)
- Eyeglass Lenses (Limited to individuals with aphakia)
- Family Planning Services and Supplies
- Federally Qualified Health Center Services/Rural Health Clinic Services
- Home Health Services
- Hospice Services
- ICF/IID and ICF/ORC (Requires an institutional level of care)
- Inpatient Drug & Alcohol Services
- Inpatient Hospital Services
- Inpatient Mental Health Services
- Laboratory Services
- Maternity - Physician, Certified Nurse, Midwives, Birth Centers
- Medical Supplies
- Methadone Maintenance
- Mobile Mental Health Treatment
- Non-Emergency Medical Transportation (only to and from covered services)
- Nursing Facility Services
- Nutritional Supplements
- Optometrist Services
- Outpatient Drug & Alcohol Services
- Outpatient Hospital Services
- Partial Psychiatric Hospitalization
- Peer Support Services
- Physician Services
- Podiatrist Services
- Prescription Drugs
- Primary Care Provider Services
- Prosthetics and Orthotics (Orthopedic shoes and hearing aids are not covered)
- Psychiatric Clinic Services
- Radiology Services (Examples: x-rays, MRIs, CTs)
- Renal Dialysis Services
- Targeted Case Management Services - Behavioral Health Only (Limited to individuals with SMI only)
- Targeted Case Management Services - Other than Behavioral Health (Limited to individuals identified in the target group)
- Therapy (Physical, Occupational, Speech) - Habilitative and Rehabilitative (Only when provided by a hospital, outpatient clinic or home health provider)
- Tobacco Cessation

If you are enrolled in a HealthChoices or Community HealthChoices Managed Care Organization (MCO) or the LIFE program, please check with your MCO or LIFE provider. The MCO or LIFE provider may provide more services than those required by the Medical Assistance program.



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For more information about what is included in these healthcare services along with any limits, please call: 1-800-537-8862, option # 1, # 2, # 3. If you are enrolled in a managed care plan you must call the plan.

You may get these services:

- Ambulance Services/Emergency Room
- Certified Registered Nurse Practitioner Services
- Children's Health Services (any kind of care that is medically necessary, including yearly checkups)
- Chiropractic Services
- Clinic Services
- Crisis Services
- Dental Services
- Diagnostic Services
- Durable Medical Equipment
- Early and Periodic Screening, Diagnosis and Treatment
- Eyeglasses
- Family Planning Services and Supplies
- Federally Qualified Health Center Services/ Rural Health Center Services
- Home Health Services
- Hospice Services
- Inpatient Hospital Services
- Inpatient and Outpatient Behavioral Health Services (Mental Health or Substance Abuse Treatment)
- Laboratory Services
- Medical Supplies
- Non-Emergency Medical Transportation (only to and from covered services)
- Nursing Facility Services
- Nutritional Supplements
- Occupational Therapy Services
- Optometrist Services
- Outpatient Hospital Services
- Physical Therapy
- Physician Services
- Podiatrist Services
- Prescription Drugs
- Preventative Services
- Prosthetics and Orthotics
- Radiology Services (x-rays, MRIs, CTs)
- Rehabilitative Services
- Renal Dialysis Services
- Screening Services
- Services Provided by School-Based Service Providers
- Speech, Hearing and Language Therapy Services
- Targeted Case Management Services

If you are enrolled in a HealthChoices Managed Care Organization please check with the plan since they may provide additional services above those required by the Medical Assistance program.



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Here are some helpful tips on using Medical Assistance:

Be sure to carry your ACCESS card with you at all times. If you need family planning or family planning-related services, present your ACCESS card, and any other private insurance cards you may have, when you obtain these services.

If you need a new ACCESS card, call: 1-877-395-8930. If you live in Philadelphia, call: 1-215-560-7226.

Please note that this benefit package does NOT meet the requirements of minimum essential coverage as detailed under the Affordable Care Act.

The following is a partial list of the services included in this family planning services benefit package:

- Office visits to your family planning health care provider for evaluation, follow up, and referral to other health care providers as necessary.
- Counseling from your health care provider regarding pregnancy; to prepare for pregnancy, to prevent unintended pregnancy, and to enable individuals to control the timing and spacing of pregnancies.
- Initiation and management of contraception, including male and female sterilization.
- Birth control supplies and medications.
- Prevention of sexually transmitted diseases (STDs) with vaccines and condoms.
- Treatment of STDs through medications and/or procedures.
- Laboratory services for the screening of STDs, HIV (the virus that causes AIDS), anemia, sickle cell disease, and pregnancy.
- Screening and education regarding breast, reproductive, and testicular cancer.
- Counseling regarding smoking cessation.

A typical family planning office visit for women may include: a pelvic exam; screenings for breast and reproductive cancers; screening for high blood pressure, anemia, and diabetes; tests for sexually transmitted diseases, including HIV; counseling about a woman's plans for pregnancy; and, if appropriate, a prescription for contraception.

A typical family planning office visit for men may include: testing and treatment for STDs and condoms for prevention; HIV testing and prevention education; testicular exams and education about testicular cancer; and information on safe and effective contraception for you and your partner.

If you have questions about what is covered, please check with your provider.