

Medical Assistance Benefit Changes

**PHILADELPHIA
COORDINATED HEALTH CARE**
123 S. Broad Street, 22nd Floor
Philadelphia, PA 19109

Please visit the following website for additional information:

www.dpw.state.pa.us



Enhancing Access to
Community Health Care

Please visit us on our website at
www.pchc.org

Community Outreach
Department

Phone: 215-546-0300
Fax: 215-790-4976

Monique Shaw, MPH
Outreach Projects Manager
Ext. 3230
E-mail: mshaw@pmhcc.org

Julio Nieves
Individual, Family &
Community Outreach
Specialist
Ext. 3387
Email: jnieves@pmhcc.org



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Southeastern PA Health Care Quality Unit

Within the past half year there have been two important benefit changes for individuals with Medical Assistance in “fee for service”. Getting the details of medical insurance is oftentimes challenging; not to mention times such as this when changes are occurring quickly. In an effort to minimize confusion and increase your level of understanding, the chart below was created to highlight key components of the dental and pharmacy benefit changes under Medical Assistance.

	Dental Benefit	Pharmacy Benefit
Date Effective	September 30, 2011	January 3, 2012
Age Group Affected	21 and older	21 and older
Individuals Exempt	Under 21, adults living in nursing facilities or intermediate care facilities (ICF's)	Under 21, pregnant women, adults living in nursing facilities or intermediate care facilities (ICF's)
Reason for Change	To end or limit coverage for specific high-cost services and items	To reduce Medical Assistance program spending
Changes	Dental exams and prophylaxis (limited to twice per year) Dentures limited to 1 upper arch and 1 lower arch (full or partial denture) per lifetime Crowns, endodontic and periodontal services covered (ONLY with approved BLE request**)	Limited to 6 prescription drugs per month Any drugs over the 6 prescription drug limit will only be covered with an approved BLE request** <i>There are medications that are exempt. The list can be found at www.dpw.state.pa.us</i>
Benefit Limit Exceptions (BLE)**	Approved BLE request submitted by the dentist and the individual's health care provider before the service or up to 60 days after the service	Approved BLE request submitted by your health care provider or your prescribed medication is listed on the exempt medications list
Benefit Limit Exceptions Process?	Dentists should refer to the MA Program's Dental Provider Handbook, Section 6.8 for specific instructions regarding how to submit a Dental BLE request, form MA 549.	To ask for a BLE, the health care provider must fax or call the MA Pharmacy Provider Call Center between 8:00 am and 4:30 pm., Monday – Friday.
Additional Information	Medical Assistance Recipient Service Center 1-800-657-7925 or www.dpw.state.pa.us	Medical Assistance Recipient Service Center 1-800-657-7925 or www.dpw.state.pa.us

If you are enrolled in a Medical Assistance Managed Care Organization, contact your plan directly to ask how these changes apply to you. **Note: Most of the plans are adapting these changes too.**