



Need more information? Contact our Navigation Services Team at 303-432-5130 or navigation@jcmh.org

These services are examples of benefits that may be available to you and your family. You may qualify for more benefits and services. Some services may require prior authorization or approval from Health First CO. Additionally, there are limits on some services and benefits.*

***Exclusions apply** or may apply to these benefits – contact Medicaid customer service to verify at 1-800-221-3943.

If you notice any changes or inconsistencies with our resources, please inform Navigation to help us stay current.

For more information on Health First Colorado Benefits, please visit:

<https://www.healthfirstcolorado.com/benefits-services/>

Health Care Providers

Primary Care (PCMP): No co-pays

Specialist Visits: No co-pays

Home Health: No co-pays

- For acute home health needs lasting 60 days or less. If these services are needed ongoing, applying for Home and Community Based Services (HCBS) through Long Term Care (LTC) would be necessary. Ask Navigation for more info as needed.

Telemedicine: No co-pays for telemedicine but co-pays may apply for other services provided

- Limit: Patients must be a part of the telemedicine appointment.

Vision Care: No co-pays

- Adult vision care benefit includes medically necessary eye exams, glasses, and contact lenses only after surgery.
- Limit: does not include orthoptic or eye training therapy.

Dental Services

Dental Services* include cleanings, fillings, root canals, crowns, and partial dentures.

- No copays; no annual benefit limit for adults or children.
- Sometimes requires prior authorization.
- DentaQuest operates a customer service center to specifically answer Health First Colorado members' question regarding dental benefits
 - DentaQuest can be reached at 855-225-1729 or at dentaquest.com

Hospitalization, Emergency Services, Transportation and Other Services

- Emergency Room: No copays if determined to be an emergency; \$8 per visit if not an emergency
- Ambulance Services: No copays

Contents:

- [Health Care Provider](#) – page 1
- [Dental Services](#) – page 1
- [Hospitalization, Emergency Services, Transportation and Other](#) – pages 1-2
- [Mental Health, Substance Use and other Behavioral Health](#) – pages 3
- [Pharmacy and Durable Medical Equipment](#) – page 3
- [Physical, Occupational or Speech Therapy](#) – page 3-4
- [Laboratory Services](#) – page 4
- [Preventative and Wellness Services](#) – page 4-5
- [Family Planning](#) – page 5

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- Prior authorization only required when it is a non-emergency, like being transferred to a new hospital.
- Non-Emergent Medical Transportation: No co-pays
- Urgent Care Centers: No co-pays
- Outpatient Surgery*: No co-pays
- Outpatient Hospital Services: No co-pays
- Inpatient Medical/Surgical Care: No co-pays
 - Cleft palate surgery, bariatric surgery, and dental anesthesia may be covered.
- Organ and Transplants*: No co-pays
- Anesthesia: No co-pays
- Breast Reconstruction*: No co-pays
 - Breast reconstructive surgery may be covered for members with a history of breast disease diagnosis and surgical procedure within the prior 5 years.
- Hospice: No co-pays
 - No more than 9 months
 - Adults must forego curative care
- Private Duty Nursing: No co-pays
 - Provides one-on-one care to patients
 - Limited to 23 hours a day for adults
 - Children can get up to 24 hours of private duty nursing each day up to their 21st birthday.
- Radiation Therapy and Chemotherapy: No co-pays
- Prenatal and Post-Partum Care: pregnant patients and parenting members do not have co-pays
 - 1 comprehensive (or complete) visit and 7-13 prenatal visits that last the whole pregnancy plus 60 days after giving birth.
 - Members who've declared their pregnancy will also be guaranteed coverage for the 12 months after their pregnancy ends.
 - Limit: Only for women of childbearing age
- Delivery and Inpatient Maternity Services
 - Pregnant and parenting members do not have to pay co-pays.
- Newborn Child Coverage
 - Pregnant and parenting members do not have to pay co-pays.
 - Newborn child coverage for the whole first year after a baby is born
 - Limited to newborns born to mothers on Health First CO
- Breast Pumps
 - Pregnant members do not have to pay co-pays.
 - Pregnant members may receive a pump as early as the 28th week of pregnancy.
 - Postpartum members may receive a pump at any time.
 - Both manual and electric breast pumps are covered.
 - Breast pumps must be prescribed by a physician, physician assistant, or nurse practitioner.
 - Breast pumps must be provided by an approved supplier, which are often pharmacies.
- Specialty Programs
 - Pregnant and parenting members do not have to pay co-pays.
 - Special Nurse Home Visitor programs for first time mothers
 - Home visits until the child turns two years old
 - Program is only available to first-time mothers
 - Prenatal Plus
 - Prenatal Plus is for at risk mothers and babies
 - Mothers can be in the program their whole pregnancy plus 60 days after giving birth

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- Special Connections
 - Special Connections is for pregnant women who have alcohol and/or drug abuse problems
 - Mothers can be in the program for their whole pregnancy and until their child turns one year old.

Mental Health, Substance Use Disorder, or Behavioral Health Services:

- Alcohol and/or drug assessment*: No co-pays
- Physical assessment of detoxification progression including vital signs monitoring: No co-pays*
- Behavioral health counseling and therapy, individual*: No co-pays
- Alcohol and/or drug services, group counseling by a clinician*: No co-pays
- Alcohol and/or drug services, targeted case management*: No co-pays
- Safety assessment including suicide ideation and other behavioral issues*: No co-pays
- Level of motivation assessment for treatment evaluation*: No co-pays
- Drug screening & monitoring*: No co-pays
- Medication-assisted treatment*: No co-pays
- Inpatient Hospital*: No co-pays
- Outpatient Psychotherapy*: No co-pays
- Group Psychotherapy*: No co-pays
- Family Psychotherapy*: No co-pays
- Mental Health Assessment*: No co-pays
- Pharmacologic Management*: No co-pays
- Outpatient Day Treatment, non-residential*: No co-pays
- Emergency/Crisis Services, Case Management*: No co-pays
- Biologically-based mental illnesses and disorders*: No co-pays
- Mental Health and Substance Use Disorder
 - Outpatient hospital & physician*: No co-pays
 - Inpatient hospital*: No co-pays
- School-based mental health services: No co-pays
 - Available only to children with Individual Education Programs (IEP)

Pharmacy and Durable Medical Equipment Benefits

- Prescription Drugs:
 - Generic medicines: No co-pays
 - Pregnant women and children do not have to pay co-pays for prescription drugs
 - Exclusions*: the generic equivalent will be given without prior authorization. Non-generic drugs are given only with prior authorization or if there is no equivalent.
- Durable Medical Equipment
 - Durable medical equipment that can be reused and is prescribed by a provider such as wheelchairs, crutches, gait trainers and others.
 - No co-pays

Physical, Occupation, or Speech Therapy

- Home Health therapies (physical therapy/occupational therapy/speech therapy)
 - Acute: No co-pays, 60 days of treatment per acute (serious) condition

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- Long term*: No co-pays, only available to children 20 years of age and younger
- Outpatient Speech Therapy
 - No co-pays
 - Some daily limits apply.
 - No limits for children. Children may qualify for rehabilitative and Habilitative therapy.
 - Adults limited to rehabilitative therapy only. Some adults qualify for Habilitative therapy.
- Inpatient Speech Therapy
 - No co-pays
- Outpatient physical therapy/occupational therapy:
 - No co-pays
 - Some daily limits apply
- Inpatient Physical therapy/ occupational therapy:
 - No co-pays

Laboratory Services

- Lab and Radiology*: No co-pays
 - Sometimes requires prior authorization.

Preventative and Wellness Services:

- Preventative and wellness services and chronic disease management*
 - No co-pays
 - Preventive and wellness services and chronic disease management such as aspirin use, blood pressure screening, breast cancer screening, cholesterol screening, depression screening, healthy diet counseling, sexually transmitted disease prevention counseling, tobacco use screening and counseling and others.
 - 1 adult annual physical per year
 - Counseling to help quit smoking is limited to three times per year for adults
- Immunizations
 - Such as: influenza, chicken pox, measles and others
 - No co-pays
- Colorectal Cancer Screening
 - No co-pays
- Screening mammography: No co-pays
 - Limited to 1 screening per year
 - Limited to women age 40 and older and for younger women who are high risk
- Audiology: No co-pays
 - Limits:
 - Hearing aids: 1 set per 3-5 years
 - Audiology benefit includes hearing aids for ages 20 and under. Covers supplies. Replacements expected every 3-5 years. Hearing aids may be replaced when they no longer fit, have been lost or stolen, or the current hearing aid is no longer medically appropriate for the child. No ear molds for swimming/noise reduction.
 - Covers Cochlear implants for only ages 20 and under, replacement when current unit is broken/non-functional.
 - All ages: Replacement for current cochlear implant if broken/lost.

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- Allergy testing & injections: No co-pays
 - Limit: Investigative and experimental treatments are not covered
- Screening Pap tests: No co-pays, 1 test per year
- Gynecological exam: No co-pays, 1 exam per year
- Prostate cancer screening: No co-pays, 1 exam per year
- Routine foot care: No co-pays
 - 1 service every 60 days
 - Acute care (serious) issues allow any amount of medically necessary podiatric services

Family Planning Services

- Office Visits & Counseling: No co-pays
 - 1 annual family planning visit, at least 10 months apart. Additional family planning follow-up visits and services are covered when medically necessary.
- Surgical Sterilization : No co-pays
 - Services include tubal ligations and vasectomies
 - Available only to clients 21 years of age and older.
 - Informed Consent Form required for surgical sterilization. Member must be 21 years or older and mentally able to give informed consent. Procedure may be provided 30 days after informed consent, but within 180 days.
- Routine Contraceptives: No co-pays
 - All FDA approved contraceptive methods are covered.
 - 12-month supply of oral pill, vaginal ring, or topical contraceptives.
 - Certain types of contraceptives such as condoms or shots may have different limits.
- Long Acting Reversible Contraceptives (IUDs and birth control implants): No co-pays
 - Long-acting, reversible contraceptives (LARC) such as intrauterine devices (IUDs) and implants. Coverage includes the device, insertion, removal and re-insertion at any time. Immediate postpartum LARC insertion is covered.
- Emergency Contraception: No co-pays
 - 1 package per fill. Requires a prescription from a doctor or a pharmacist.
- Fertility Assessments: No co-pays
 - Includes services to identify potential causes or reasons an individual is unable to become pregnant.
 - Treatment for infertility causes is not covered.