

## Delaware Healthy Children Program (DHCP) 2021 Benefit Grid

| Benefit   | Coverage   |
|---|--|
| Ambulatory service centers  | ✓  |
| Behavioral health and substance abuse treatment (Children's outpatient visits beyond 30 are provided through Division of Prevention and Behavioral Health Services) | Covers adults 18 and older. Covers children 17 and under with 30 outpatient visits per year. |
| Case management and care coordination services  | ✓  |
| Disease management programs with incentives for healthy outcomes  | ✓  |
| Eyeglasses or contact lenses  | Covers children under 21 annually.   |
| Family planning   | Covers in-network. Covers non-par family planning services for DSHP. Does not cover DHCP.    |
| Hospital: inpatient or outpatient care  | ✓  |
| Non-emergency transport   | Covers DSHP. Does not cover DHCP.  |
| OB/GYN exams, pap smear   | ✓  |
| Pharmacy  | ✓  |
| Pre- and post-natal care (delivery, birthing center, newborn care, and early discharge home visits for new mothers)   | MOM Matters (Perinatal Care Program)   |
| Routine doctor office visit, check-up, sick visits  | ✓  |
| Routine eye exams   | Covers children under 21 annually; more often only if medically necessary.                   |
| Specialist visits   | ✓  |
| Surgery: inpatient or outpatient  | ✓  |
| Tests and studies, laboratory, and x-ray  | ✓  |
| Well baby, well child visits, immunizations   | ✓  |
|   | Covered Only When Medically Necessary  |
| Ambulance   | ✓  |
| Durable medical equipment   | ✓  |
| Physical, speech, and occupational therapy  | ✓  |
| Private duty nursing, home health care  | ✓  |
| Skilled nursing facility  | Covers up to 30 days per year  |