

Covered Services

As a Molina MyCare Ohio Medicaid member, you will continue to receive all medically-necessary Medicaid-covered services at no cost to you.

The following list of covered services helps you know which services need prior authorization (PA) and which do not. Not all services that need PA are included in this list. For more information, or if you have any questions about PA requests, please call Member Services. You can also ask your provider.

Covered Services	
Acupuncture	Acupuncture coverage is limited to the pain management of migraine headaches and lower back pain.
Ambulance and wheelchair van transportation	PA is needed for non-emergency transportation. PA is not needed for medically necessary wheelchair transportation.
Assisted living services	PA is needed.
Dental services	Routine services do not need PA. Dental services other than routine care need PA.
Durable medical equipment	Some items need PA. With a prescription, you can get certain durable medical equipment items under \$30 at retail pharmacies in the Molina MyCare Ohio network at no cost. Call your Molina Care Manager or Member Services for more information.
Family planning and supplies	PA is not needed.
Free-standing birth center services at a free-standing birth center	PA is not needed. Call Member Services to see if there are any qualified centers in Ohio.
Hearing services, including hearing aids	PA is not needed for hearing aids.
Hospice care in a nursing facility (care for terminally ill, e.g., cancer patients)	PA is not needed.
Medicaid home health and private duty nursing services	PA is needed.
Mental health and substance abuse services	Some services need prior authorization. Prior authorization is not needed for behavioral health crisis intervention or assessment services at a Ohio Department of Mental Health and Addiction Services (MHAS) certified community mental health center or addiction treatment center. You can call Molina Healthcare's 24-Hour Behavioral Health Crisis Line any time 24 hours a day, seven days a week. Registered nurses trained for a crisis are ready to help, even in the middle of the night. Call (855) 895-9986 (TTY 711).

Covered Services	
Nursing facilities and long-term care services and supports	Nursing facility services need PA. Nursing facility stays are covered for members. Call Member Services for information on available providers.
Physical exam required for employment or for participation in job training programs if the exam is not provided free of charge by another source	PA is not needed.
Prescription drugs (certain drugs not covered by Medicare Part D)	Selected drugs, including injectables and some over-the-counter drugs, need PA.
Respite services	Respite services for Supplemental Security Income (SSI) members under the age of 21, as approved by CMS within the applicable 1915(b) waiver and as described in OAC rule 5160-26-03
Services for children with medical handicaps (Title V)	PA is not needed.
Vision (optical) services, including eyeglasses	PA is not needed.
Waiver services	PA is needed. Coverage is based on member's determination of need.
Yearly well-adult exams when Medicare does not cover these	PA is not needed.