

LIST OF NQTLS AND MH/SUD BENEFITS BY CLASSIFICATION AND BENEFIT PACKAGE GROUP – HIGHMARK HEALTH OPTIONS

Benefit Package Groups

NQTLs were analyzed by each of the following benefit package groups.

- The Adult benefit package group (i.e., “Adult”), which includes the following MCO members (note: this group includes S-CHIP beneficiaries 18 and older who are not enrolled in PROMISE; MH/SUD benefits for these beneficiaries are administered by the MCO):
 - Diamond State Health Plan (DSHP) adults who are not in the alternative benefit plan (ABP) nor Promoting Optimal Mental Health for Individuals through Supports and Empowerment (PROMISE)
 - DSHP adults in the ABP
 - Diamond State Health Plan Plus (DSHP Plus) adults who are not receiving long-term services and supports (LTSS) and not in PROMISE
 - DSHP Plus adults receiving LTSS (DSHP Plus LTSS)
- The PROMISE benefit package group (i.e., “PROMISE”), which includes the following MCO members (note: this group includes S-CHIP beneficiaries 18 and older who are enrolled in PROMISE; most MH/SUD benefits for these beneficiaries are administered by DSAMH):
 - DSHP adults not in the ABP but in PROMISE
 - DSHP adults in ABP and PROMISE
 - DSHP Plus adults in PROMISE
 - DSHP Plus LTSS adults in PROMISE)
- The Children benefit package group (i.e., “Children”), which includes the following MCO members (note: DSCYF is responsible for providing MH/SUD benefits to children, including S-CHIP beneficiaries, under age 18 who require additional units beyond the 30 outpatient units covered by the MCO or require more intensive services than those provided by the MCO; S-CHIP beneficiaries who are 18 or older included under Adults (if they are not eligible for PROMISE) or PROMISE (if they are eligible for PROMISE):
 - Medicaid children under the age of 18
 - Medicaid children 18-21 years of age
 - Children enrolled in the separate CHIP (S-CHIP) program under 18 years of age
 - Children enrolled in S-CHIP 18 to 19 years of age

NQTL Definitions

The following NQTLs were analyzed as part of the parity analysis. NQTLs that apply to MH/SUD FFS benefits managed by the State (DSAMH, DSCYF) are noted with an asterisk (*) in the definitions and table of contents sections below.

#1 Development/Modification/Addition of Medical Necessity/Medical Appropriateness/Level of Care Guidelines* – (A) Inpatient, (B) Outpatient

The development, modification or addition of criteria against which benefit authorization requests are compared to determine whether the benefit is appropriate for the evaluation and treatment of a disease, condition, illness or injury and consistent with the applicable standard of care. This should include criteria that limit coverage to individuals who are a danger to themselves or others.

#2 Prior Authorization* – (A) Inpatient, (B) Outpatient, (D) Prescription Drugs

Process used to determine if benefit coverage will be authorized. May include eligibility, coverage, medical necessity, medical appropriateness and/or level of care review. May occur prior to service delivery, after a designated number of services or amount of time, or between emergency room and inpatient levels of care.

#3 Concurrent Review* – (A) Inpatient, (B) Outpatient, (C) Emergency Care

Process used to determine if benefit coverage will be authorized beyond the initial authorization (see prior authorization above) within the same benefit year or treatment episode or for SUD benefits that cannot be prior authorized pursuant to SB109. May include eligibility, coverage, medical necessity, medical appropriateness and/or level of care reviews.

#4 Retrospective Review – (A) Inpatient, (B) Outpatient, (C) Emergency Care

Process used to determine if benefits requiring prior authorization will be covered after services have been delivered. May include eligibility, coverage, medical necessity, medical appropriateness and/or level of care reviews. May result in recoupment of payments.

#5 Requiring Use of Preferred Drugs before Approving Non-preferred Agents (Step Therapy) – (D) Prescription Drugs

Step therapy is the practice of initiating drug therapy for a medical condition with a less costly and clinically appropriate drug and progressing to a more costly and clinically appropriate drug when necessary.

#6 Experimental/Investigational Determinations – (A) Inpatient, (B) Outpatient, (C) Emergency Care, (D) Prescription Drugs

Process used to determine which benefits are experimental or investigational and excluded from coverage.

#7 Provider Reimbursement (in-network) – (A) Inpatient, (B) Outpatient, (D) Prescription Drugs

The process by which provider reimbursement rates are established for in-network providers.

#8 Usual, Customary and Reasonable (UCR) Determinations – (A) Inpatient, (B) Outpatient, (C) Emergency Care

The process by which provider payments are established for out-of-network providers.

#9 Provider Enrollment and Credentialing Requirements* – (A) Inpatient, (B) Outpatient, (C) Emergency Care

The process by which providers are enrolled in Medicaid and determined qualified to participate in the MCO's provider network.

#10 Geographic Restrictions – (A) Inpatient, (B) Outpatient, (C) Emergency Care

Restrictions on coverage of benefits delivered by providers based on their location (e.g., out-of-state providers).

#11 Standards for Out-of-Network Coverage – (A) Inpatient, (B) Outpatient, (C) Emergency Care

Standards that determine whether out-of-network coverage will be provided (e.g., distance to closest in-network provider, availability of benefit in-network).

#12 Drugs not Covered Pursuant to Section 1927(d)(2) – (D) Prescription Drugs

Drugs that may be excluded from coverage in accordance with Section 1927(d)(2) of the Social Security Act.

#13 Early Refills – (D) Prescription Drugs

The requirement that a certain percentage of a prescription be used prior to allowing a refill.

#14 Copay Tiers – (D) Prescription Drugs

Requiring a different copay amount depending on the cost of the prescription.

#15 Pharmacy Lock-In – (D) Prescription Drugs

Programs used to restrict a member to a certain prescriber and/or pharmacy.

NQTL	Adult	PROMISE	Children
<p>Development/Modification/Addition of Medical Necessity/ Medical Appropriateness/Level of Care Guidelines*</p>	<p>Inpatient classification Managed by MCO: <ul style="list-style-type: none"> • Inpatient Mental Health • MH Residential (18-21 only) Managed by DSAMH: <ul style="list-style-type: none"> • N/A Outpatient classification Managed by MCO: <ul style="list-style-type: none"> • MH Partial Hospitalization • MH Intensive Outpatient • Intensive Outpatient Services, • Initial evaluation with clinician/therapist </p>	<p>Inpatient classification Managed by MCO: <ul style="list-style-type: none"> • Inpatient Mental Health • MH Residential (18-21 only) Managed by DSAMH: <ul style="list-style-type: none"> • N/A Outpatient classification Managed by MCO: <ul style="list-style-type: none"> • N/A Managed by DSAMH: PROMISE benefits: <ul style="list-style-type: none"> • Benefits Counseling • Community Psychiatric Support and Treatment (CPST) • Psychosocial Rehabilitation (PSR) • Small Group and Supported Employment • Personal Care • Peer Supports • Individual Supported Employment • Assertive Community Treatment </p>	<p>Inpatient classification Managed by MCO: <ul style="list-style-type: none"> • N/A Managed by DSCYF: <ul style="list-style-type: none"> • Inpatient Mental Health • Psychiatric Residential Treatment Facility • Residential Rehabilitation Services, Mental Health • Crisis Residential Bed Services Outpatient classification Managed by MCO: <ul style="list-style-type: none"> • Psychological Testing • Neuropsychological Testing • Behavioral Health Assessment • Specialist/Treatment Plan Development Managed by DSCYF: <ul style="list-style-type: none"> • MH Partial Hospitalization • Outpatient, Mental Health • Therapeutic Support for Families (CPST, FPSS, and PSR) • Evidence Based Practices (MST, DBT, FBMHS, FFT) • Day Treatment, Mental Health • Crisis Intervention Services </p>

NQTL	Adult	PROMISE	Children
<p>Development/Modification/Addition of Medical Necessity/ Medical Appropriateness/Level of Care Guidelines* (continued)</p>		<p>(ACT)</p> <ul style="list-style-type: none"> • Nursing Services • Respite Services • Community Transition Services (Client Assistance Funds) • IADLs • Non-medical transport • Group Homes, Community Based Residential Alternatives, SAP • Care Management <p>MH</p> <ul style="list-style-type: none"> • Psychotherapy with patient • Psychoanalysis • Health and behavior assessment • Health and behavior intervention • Psychiatric Diagnostic Evaluations 	
<p>Prior Authorization*</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Inpatient Mental Health • MH Residential (18-21 only) <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Inpatient Mental Health • MH Residential (18-21 only) <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • N/A <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> • Inpatient Mental Health • Psychiatric Residential Treatment Facility • Residential Rehabilitation Services, Mental Health • Crisis Residential Bed Services

NQTL	Adult	PROMISE	Children
<p>Prior Authorization* <i>(continued)</i></p>	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • MH Partial Hospitalization • MH Intensive Outpatient <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A 	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • N/A <p>Managed by DSAMH:: PROMISE</p> <ul style="list-style-type: none"> • Benefits Counseling • Community Psychiatric Support and Treatment (CPST) • Psychosocial Rehabilitation (PSR) • Small Group and Supported Employment • Personal Care • Peer Supports • Individual Supported Employment • Assertive Community Treatment (ACT) • Nursing Services • Respite Services • Community Transition Services (Client Assistance Funds) • IADLs • Non-medical Transport • Group Homes, Community Based Residential Alternatives, SAP • Care Management 	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Psychological Testing • Neuropsychological Testing • Behavioral Health Assessment • Initial Assessment/Intake • Specialist/Treatment Plan Development <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> • MH Partial Hospitalization • Outpatient, Mental Health • Therapeutic Support for Families (CPST, FPSS, and PSR) • Evidence Based Practices (MST, DBT, FBMHS, FFT) • Day Treatment, Mental Health • Crisis Intervention Services • Parent-Child Interaction Therapy (PCIT)

NQTL	Adult	PROMISE	Children
Prior Authorization* <i>(continued)</i>	<p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> Certain MH/SUD prescription drugs 	<p>MH</p> <ul style="list-style-type: none"> Psychotherapy with patient Psychoanalysis Health and behavior assessment Health and behavior intervention Psychiatric Diagnostic Evaluations <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> Certain MH/SUD prescription drugs 	<p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> Certain MH/SUD prescription drugs
Concurrent Review*	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> MH Inpatient MH Residential (18-21 only) Inpatient Substance Abuse Residential Detoxification Substance Abuse Rehabilitation SA Residential Treatment Facility <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> N/A 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> MH Inpatient MH Residential (18-21 only) Medically managed intensive inpatient detoxification <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> Subacute Detoxification, Inpatient Alcohol and/or drug services; acute detoxification (residential addiction program inpatient) Alcohol and Drug Treatment Program (Residential Rehab) 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> N/A <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> Inpatient Mental Health Psychiatric Residential Treatment Facility Residential Rehabilitation Services, Mental Health Crisis Residential Bed Services Residential Rehabilitation Services, Substance Use

NQTL	Adult	PROMISE	Children
<p>Concurrent Review* <i>(continued)</i></p>	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • MH Partial Hospitalization • MH Intensive Outpatient Services • ECT • TMS (Transcranial Magnetic Stimulation) • SA Intensive Outpatient • SA Partial Hospital <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A 	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • N/A <p>Managed by DSAMH: PROMISE</p> <ul style="list-style-type: none"> • Benefits Counseling • Community Psychiatric Support and Treatment (CPST) • Psychosocial Rehabilitation (PSR) • Small Group and Supported Employment • Personal Care • Peer Supports • Individual Supported Employment • Assertive Community Treatment (ACT) • Nursing Services • Respite Services • Community Transition Services (Client Assistance Funds) • IADLs • Non-medical Transport • Group Homes, Community Based Residential Alternatives, SAP 	<p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Neuropsychological Testing • Psychological Testing • MH Intensive Outpatient • Initial Assessment/Intake • Specialist/Treatment Plan Development • SA Intensive Outpatient <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> • MH Partial Hospitalization • Outpatient, Mental Health • Therapeutic Support for Families (CPST, FPSS, and PSR) • Evidence Based Practices (MST, DBT, FBMHS, FFT) • Day Treatment, Mental Health • MH Partial Hospitalization • Crisis Intervention Services • Parent-Child Interaction Therapy (PCIT) • Outpatient, Substance Use

NQTL	Adult	PROMISE	Children
	<p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits 	<ul style="list-style-type: none"> • Care Management MH/SUD • Psychotherapy with patient • Psychoanalysis • Health and behavior assessment • Health and behavior intervention • Psychiatric Diagnostic Evaluations • Alcohol and/or drug abuse service; detoxification (residential addiction program outpatient) • Alcohol and/or drug services, intensive outpatient <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits 	<p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits
<p>Retrospective Review</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • MH Inpatient • MH Residential (18-21 only) • Inpatient Substance Abuse Residential Detoxification • Substance Abuse Rehabilitation • SA Residential Treatment Facility <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A <p>Outpatient classification</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • MH Inpatient • Inpatient Substance Abuse Residential Detoxification <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A <p>Outpatient classification</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • NA <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> • N/A <p>Outpatient classification</p>

NQTL	Adult	PROMISE	Children
<p>Retrospective Review <i>(continued)</i></p>	<p>Managed by MCO:</p> <ul style="list-style-type: none"> • Partial Hospitalization • Intensive Outpatient Services • ECT • Genetic Testing • TMS(Transcranial Magnetic Stimulation) <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits 	<p>Managed by MCO:</p> <ul style="list-style-type: none"> • N/A <p>Managed by DSAMH:</p> <ul style="list-style-type: none"> • N/A <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits 	<p>Managed by MCO:</p> <ul style="list-style-type: none"> • Neuropsychological Testing • Psychological Testing • Initial Assessment/Intake • BH Specialist/Treatment Plan Development <p>Managed by DSCYF:</p> <ul style="list-style-type: none"> • N/A <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Emergency care benefits
<p>Requiring Use of Preferred Drugs before Approving Non-preferred Agents (Step Therapy)</p>	<p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs 	<p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs 	<p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs
<p>Experimental/Investigational Determinations</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> • Experimental or investigational MH/SUD benefits are not covered benefits

NQTL	Adult	PROMISE	Children
Experimental/Investigational Determinations (continued)	<p>covered benefits</p> <p>Prescription drug classification Managed by MCO:</p> <ul style="list-style-type: none"> Experimental or investigational MH/SUD benefits are not covered benefits 	<p>covered benefits</p> <p>Prescription drug classification Managed by MCO:</p> <ul style="list-style-type: none"> Experimental or investigational MH/SUD benefits are not covered benefits 	<p>covered benefits</p> <p>Prescription drug classification Managed by MCO:</p> <ul style="list-style-type: none"> Experimental or investigational MH/SUD benefits are not covered benefits
Provider Reimbursement (in-network)*	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD prescription drug providers 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD prescription drug providers 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All in-network MH/SUD prescription drug providers
Usual, Customary and Reasonable (UCR) Determinations (out-of-network provider reimbursement)	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD

NQTL	Adult	PROMISE	Children
<p>Usual, Customary and Reasonable (UCR) Determinations (out-of-network provider reimbursement) (continued)</p>	<p>outpatient providers</p> <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers 	<p>outpatient providers</p> <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers 	<p>outpatient providers</p> <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers
<p>Provider Enrollment and Credentialing Requirements*</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD prescription drug providers 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD prescription drug providers 	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD outpatient providers <p>Emergency care classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers <p>Prescription drugs classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD prescription drug providers
<p>Geographic Restrictions</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p>	<p>Inpatient classification Managed by MCO:</p> <ul style="list-style-type: none"> All contracted MH/SUD inpatient providers <p>Outpatient classification Managed by MCO:</p>

NQTL	Adult	PROMISE	Children
Geographic Restrictions <i>(continued)</i>	<ul style="list-style-type: none"> All contracted MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers 	<ul style="list-style-type: none"> All contracted MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers 	<ul style="list-style-type: none"> All contracted MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All contracted MH/SUD emergency care providers
Standards for Out-of-Network Coverage	Inpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers Outpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers 	Inpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers Outpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers 	Inpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD inpatient providers Outpatient classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD outpatient providers Emergency care classification Managed by MCO: <ul style="list-style-type: none"> All out-of-network MH/SUD emergency care providers
Drugs not Covered Pursuant to Section 1927(d)(2)	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> Certain MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> Certain MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> Certain MH/SUD prescription drugs
Early Refills	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs
Copay Tiers	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> All MH/SUD prescription drugs

NQTL	Adult	PROMISE	Children
Pharmacy Lock-In	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs 	Prescription drugs classification Managed by MCO: <ul style="list-style-type: none"> • Certain MH/SUD prescription drugs

* = NQTL applies to MH/SUD FFS benefits managed by the State (DSAMH, DSCYF)

N/A = Not applicable