



## Health Plan Benefits for Children in Charleston County, *page 1*

This chart shows health plans that serve your area. It lists benefits for children, from birth to age 21. Members 19-20 must pay the same copay as adults. Use the chart to compare health plans and find the plan that is best for your children.

| Health plans →<br>↓ Benefits and services  | Absolute Total Care  | BlueChoice HealthPlan  | First Choice by Select Health of South Carolina  |
|--|--|--|--|
| <b>Member services phone line</b>  | <b>1-866-433-6041</b>  | <b>1-800-574-8864</b>  | <b>1-888-276-2020</b>  |
| <b>Website</b>   | www.absolutetotalcare.com  | www.BlueChoiceSCMedicaid.com   | www.selecthealthofsc.com   |
| <b>Doctor visits</b> (per year)  | Unlimited, no copay  | Unlimited, no copay  | Unlimited, no copay  |
| <b>Prescribed drugs</b> (per month)<br>Over the counter means non prescription                   | Unlimited, no copay for under age 19; \$3 copay for 19-20 years  | Unlimited, no copay  | Unlimited; no copay for under 19 years; \$3 copay for 19-20 years  |
| <b>Hospital stay</b> (per year)  | No copay   | No copay   | No copay   |
| <b>Lab work and X-rays</b>   | Yes  | Yes  | Yes  |
| <b>Home health care</b> (per year)   | 75 visit limit, no copay   | 75 visit limit, no copay   | 75 visit limit, no copay   |
| <b>Durable medical equipment</b>   | No copay   | No copay   | Unlimited, no copay  |
| <b>Dental care</b> (per year)<br>Extra dental services are the responsibility of the health plan | Medicaid covers routine dental care for members through the month of 21st birthday; members age 19-21 have a \$3 copay<br><br>No extra services are covered                            | Medicaid covers routine dental care for members through the month of 21st birthday; members age 19-21 have a \$3 copay<br><br>No extra services are covered                            | Medicaid covers routine dental care for members through the month of 21st birthday; members age 19-21 have a \$3 copay<br><br>No extra services are covered  |
| <b>Vision care</b> (per year)<br>Extra vision services are the responsibility of the health plan | Medicaid covers 1 exam and 1 pair of glasses for members through the month of 21st birthday; members age 19-21 have a \$2 copay for the exam only<br><br>No extra services are covered | Medicaid covers 1 exam and 1 pair of glasses for members through the month of 21st birthday; members age 19-21 have a \$2 copay for the exam only<br><br>No extra services are covered | Medicaid covers 1 exam and 1 pair of glasses for members through the month of 21st birthday; members age 19-21 have a \$2 copay for the exam only<br><br>Health plan covers 1 replacement pair of eyeglasses if the first pair is lost or damaged for members through the month of their 21st birthday, no copay |
| <b>Medical checkups</b>  | Yes  | Yes  | Yes  |
| <b>24-Hour Nurse Advice Line</b>   | Yes  | Yes  | Yes  |
| <b>Care coordination</b> (managing care from different doctors or clinics)                       | Yes, including community referrals   | Yes, including community referrals   | Yes, including community referrals   |

|   | Absolute Total Care  | BlueChoice HealthPlan  | First Choice by Select Health of South Carolina  |
|---|--|--|--|
| <b>All Health Plans offer programs targeting: Asthma, Diabetes, Pregnancy</b>   | <ul style="list-style-type: none"> <li>• Chronic Obstructive Pulmonary Disease (COPD)</li> <li>• Heart failure</li> <li>• Hypertension</li> </ul>  | <ul style="list-style-type: none"> <li>• Diet and fitness program</li> <li>• Heart disease management program</li> <li>• Stop smoking program</li> <li>• Well woman care and family planning</li> </ul>  | <ul style="list-style-type: none"> <li>• Childhood obesity</li> <li>• Stop smoking program</li> <li>• Women's health</li> </ul>  |
| <b>Extra benefits:</b> For questions concerning a plan's benefits, please call the plan's Member Services Department at the number listed above | <ul style="list-style-type: none"> <li>• Earn "Reward Dollars" for well-care doctor visits</li> <li>• Member outreach program</li> <li>• Prenatal and postpartum program</li> <li>• Social Worker to assist members</li> </ul> | <ul style="list-style-type: none"> <li>• Alere/Matria high risk services</li> <li>• Discounts on Allergy Products</li> <li>• Discounts on Alternative Health Specialists</li> <li>• Discounts with Jenny Craig and Weight Watchers</li> <li>• Discounts on Nutritional Supplements</li> <li>• A Self-Care Guide</li> </ul> | <ul style="list-style-type: none"> <li>• Gift card for children up to 21 years after completing well child exams/health screening visits</li> <li>• Member advocate to help members get access to care and community programs</li> <li>• Personal care items, after orientation</li> </ul> |

**If you have questions, call South Carolina Healthy Connections Choices, 1-877-552-4642.** Call Monday to Friday, 8 a.m. to 6 p.m. TTY: 1-877-552-4670. The call is free. Call for help in any language or to get this chart in Braille, on tape or in large type. Usted puede obtener este paquete de información en español.



## Health Plan Benefits for Children in Charleston County, *page 3*

This chart shows health plans that serve your area. It lists benefits for children, from birth to age 21. Members 19-20 must pay the same copay as adults. Use the chart to compare health plans and find the plan that is best for your children.

| Health plans →<br>↓ Benefits and services  | South Carolina Solutions   | Fee-for-Service Medicaid   |
|--|--|--|
| <b>Member services phone line</b>  | <b>1-888-366-6243</b>  | <b>1-888-549-0820</b>  |
| <b>Website</b>   | www.sc-solutions.org   | www.scdhhs.gov   |
| <b>Doctor visits</b> (per year)  | Unlimited; no copay  | Unlimited; no copay for under age 19; \$2 copay for 19-20 years  |
| <b>Prescribed drugs</b> (per month)<br>Over the counter means non prescription                   | Unlimited; no copay  | Unlimited; no copay for under age 19; \$3 copay for 19-20 years  |
| <b>Hospital stay</b> (per year)  | Unlimited; no copay  | Unlimited; no copay for under age 19; \$3 copay outpatient, \$25 copay inpatient for 19-20 years   |
| <b>Lab work and X-rays</b>   | Yes  | Yes  |
| <b>Home health care</b> (per year)   | 75 visit limit; no copay   | 75 visit limit; no copay for under age 19; \$2 copay for 19-20 years   |
| <b>Durable medical equipment</b>   | Unlimited; no copay  | Unlimited; no copay for under age 19; \$3 copay for 19-20 years  |
| <b>Dental care</b> (per year)<br>Extra dental services are the responsibility of the health plan | Medicaid covers routine dental care for members through the month of 21st birthday; no copay<br>No extra services are covered          | Medicaid covers routine dental care for members through the month of 21st birthday; members age 19-21 have a \$3 copay<br>No extra services are covered                            |
| <b>Vision care</b> (per year)<br>Extra vision services are the responsibility of the health plan | Medicaid covers 1 exam and 1 pair of glasses for members through the month of 21st birthday; no copay<br>No extra services are covered | Medicaid covers 1 exam and 1 pair of glasses for members through the month of 21st birthday; members age 19-21 have a \$2 copay for the exam only<br>No extra services are covered |
| <b>Medical checkups</b>  | Yes  | Yes  |
| <b>24-Hour Nurse Advice Line</b>   | Yes  | No nurse advice line   |
| <b>Care coordination</b> (managing care from different doctors or clinics)                       | Yes, including community referrals   | No care coordination   |

|   | South Carolina Solutions  | Fee-for-Service Medicaid  |
|---|---|---|
| <b>All Health Plans offer programs targeting: Asthma, Diabetes, Pregnancy</b>   | <ul style="list-style-type: none"> <li>• Cardiovascular disease</li> <li>• Coronary Artery Disease</li> <li>• Chronic Obstructive Pulmonary Disease</li> <li>• Hyperlipidemia</li> <li>• Hypertension</li> </ul>                              | <ul style="list-style-type: none"> <li>• No health management programs</li> </ul> |
| <b>Extra benefits:</b> For questions concerning a plan's benefits, please call the plan's Member Services Department at the number listed above | <ul style="list-style-type: none"> <li>• Growth and development program for infants and toddlers</li> <li>• Member advocate to help members get access to care and community programs</li> <li>• Nonrestrictive specialist network</li> </ul> | <ul style="list-style-type: none"> <li>• No extra benefits</li> </ul>             |

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