



Alternative Benefit Plan

Scope Limit: <input type="text" value="None"/>		<input type="button" value="Remove"/>
Other: <input type="text" value="Contact Lens prior authorization; Aids to vision approved when legally blind and will improve at least one ADL or IADL."/>		
Other 1937 Benefit Provided: <input type="text" value="Inpatient Psych. Services for Individuals Under 22"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="None"/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None"/>		
Other: <input type="text" value="No authorization requirement."/>		
Other 1937 Benefit Provided: <input type="text" value="Face-to-Face Tobacco cessation"/>	Source: <input type="text" value="Section 1937 Coverage Option Benchmark Benefit Package"/>	<input type="button" value="Remove"/>
Authorization: <input type="text"/>	Provider Qualifications: <input type="text" value="Medicaid State Plan"/>	
Amount Limit: <input type="text" value="16 visits per calendar year."/>	Duration Limit: <input type="text" value="None"/>	
Scope Limit: <input type="text" value="None"/>		
Other: <input type="text" value="Tobacco cessation counseling services are available to all non-pregnant Medicaid beneficiaries. The maximum number of visits allowed per individual per calendar year is 16. This maximum number of visits per calendar year can be exceeded based on medical necessity through a prior authorization process. This benefit has the same effective date as SPA 14-009."/>		

[Other 1937 Benefit Provided: Licensed Dental Hygienist Services](#)
[Source: Section 1937 Coverage Option Benchmark Benefit Package](#)
[Provider Qualifications: Medicaid State Plan](#)
[Amount Limit: None](#)
[Duration Limit: None](#)
[Scope Limit: None](#)

[Other: Services provided by licensed dental hygienists are covered when those services are provided by a dental hygienist who is in a collaborative agreement with a dentist licensed in Vermont. Covered services are limited to those specified in protocols for licensure and reviewed and accepted by the State of Vermont, Director of the Office of Professional Regulation, and are services covered by Medicaid.](#)