



# Alternative Benefit Plan

Other 1937 Benefit Provided:

Routine Patient Cost in Qualifying Clinical Trials

Source:

Section 1937 Coverage Option Benchmark Benefit Package

Remove

Authorization:

Provider Qualifications:

Medicaid State Plan

Amount Limit:

None

Duration Limit:

None

Scope Limit:

None

Other:

Coverage in alignment with item 30 in Att. 3.1-A and Att. 3.1-B.

Other 1937 Benefit Provided:

Licensed Dental Therapist Services

Source:

Section 1937 Coverage Option Benchmark Benefit Package

Remove

Authorization:

Provider Qualifications:

Medicaid State Plan

Amount Limit:

Aligns with item 6(D)(12) in Att. 3.1-A

Duration Limit:

None

Scope Limit:

Aligns with item 6(D)(12) in Att. 3.1-A.

Other:

Coverage in alignment with item 6(D)(12) in Att. 3.1-A.

Add