Below is a list of QUEST benefits. Some benefits have limits on when and how they can be used, and some require a referral from your PCP or a prior authorization from AlohaCare, before we will pay. AlohaCare will only pay for services and supplies on this list, when necessary to treat your illness or injury, and when the service or supply is the most cost effective treatment. There is more information regarding your benefits in your AlohaCare Member Handbook. If you have questions about your benefits, please call our Customer Service Department: Oahu: 973-1650, or Neighbor Island/Oahu (toll-free): 1-800-434-1002.

**NOTE:** if you are a QUEST-Net /QUEST-ACE member, you have different benefits. Please see pages 65 of the member handbook for a listing and explanation of QUEST-Net/QUEST-ACE benefits.

### INPATIENT CARE (OVERNIGHT HOSPITAL STAYS)
- Room and meals for semi-private room: medical/surgical, intensive care, cardiac care
- Operating room and special treatment rooms
- Inhalation therapy
- Physical therapy
- Surgery and anesthesia supplies, medical supplies, appliances, drugs, medicines, blood products
- Laboratory tests, pathology and x-rays
- Physician and surgeon visits
- Cornea and allogenic bone marrow transplants*

* Effective 8/1/07, kidney transplantation is no longer covered by the QUEST program. Benefits for a kidney transplant are covered under the State of Hawaii Medicaid Fee-for-Service program.

### OUTPATIENT CARE
- Visits to the doctor’s office
- Visits to other licensed health care providers such as podiatrist or licensed nurse practitioners
- Diagnostic x-rays, laboratory tests, radiation therapy, chemotherapy
- Allergy testing, allergy treatment (compounds/serums)
- Physical therapy, occupational therapy, speech therapy
- Audiology
- Medical supplies used in the doctor’s office, such as casts, dressings, splints

### PREVENTIVE SERVICES
- Routine physical examinations and screening tests
- Breast/pelvic examinations, pap smears, mammograms
- Routine Immunizations (shots for disease prevention)
- Mass or new immunizations (shots for disease prevention)
- Well baby care
- Voluntary family planning, including sterilization

### PREGNANCY AND MATERNITY CARE
- Nurse midwife
- Prenatal care, including prenatal vitamins
- X-rays and laboratory tests
- Delivery of infant
- Post-partum care
- Treatment of missed and threatened abortions*

* Elective abortion (ITOP) is no longer a QUEST benefit. Please refer to QUEST Program Exclusions for more information.

### OTHER FACILITY SERVICES
- Skilled nursing facility
- Hospice
- Outpatient/ambulatory surgery, including supplies, anesthesia, drugs, medicines, appliances, blood products
- Rehabilitation facility

### EMERGENCY SERVICES
- Emergency room services for emergency conditions
- Emergency ambulance services including ground ambulance and air ambulance

### VISION SERVICES
- Eye examinations (refractions): once every 12 months for members under 21 years old; once every 24 months for members 21 years of age and older
- Eyeglasses, one pair every 24 months; lost, broken, or very damaged eyeglasses may be replaced if the loss, breakage or damage was beyond your control

### OTHER SERVICES
- Non-emergency air transportation to an off-island provider, when medically necessary AND arranged through AlohaCare.
- Meals and lodging, if needed, for off-island services, when arranged through AlohaCare
- Transportation, meals and lodging for an attendant to accompany you to off-island services, only if assistance is required, and when arranged through AlohaCare
- Translation services, when arranged through AlohaCare
- Taxi or other public transportation services, only when medically necessary, when arranged through AlohaCare
- Drugs and chemicals for chemotherapy
- Hearing tests and hearing aids
- Rehabilitation supplies including orthoses and prostheses
- Prepared food formula and elemental alimentation dry products for members with certain diagnoses only

### PRESCRIPTION DRUGS*
- Medications listed on the AlohaCare formulary including over-the-counter drugs and supplies when prescribed by a doctor or other licensed health care provider

*Not all drugs are covered. Call your doctor or AlohaCare if your pharmacist is not able to fill your prescription because the drug is not covered.

### HOME HEALTH SERVICES
- Skilled nursing and home health aides
- Medical supplies and equipment
- Other medically necessary home health services
INPATIENT BEHAVIORAL HEALTH SERVICES*
• Room and meals for psychiatric and detoxification hospital stays
• Diagnostic services
• Physician and other practitioner visits

* There is a limit to the number of days of behavioral health hospital care that AlohaCare will pay for. We will pay for no more than 30 days per benefit year. A benefit year is from July 1st to June 30th. For members under the age of 21 and certain behavioral health conditions as defined by Hawaii State law, there is no limit to the number of days AlohaCare will pay for.

OUTPATIENT BEHAVIORAL HEALTH SERVICES*
• Ambulatory and crisis services
• Day treatment and day hospital
• Methadone treatment services
• Diagnostic and laboratory tests
• Physician and other practitioner visits
• Therapeutic services
• Urgent care

*There is a limit to the number of outpatient behavioral health services that AlohaCare will pay for. We will pay for no more than 24 hours of treatment per benefit year. A benefit year is from July 1st to June 30th. Unused inpatient benefits can be traded for more outpatient care. For members under the age of 21 and certain behavioral health conditions as defined by Hawaii State law, there is no limit to the number of outpatient behavioral health services that AlohaCare will pay for.

QUEST PROGRAM EXCLUSIONS
THE FOLLOWING SERVICES AND ITEMS ARE NOT QUEST PROGRAM BENEFITS -- ALOHACARE WILL NOT PAY FOR THESE

All services excluded by the Hawaii Medicaid Program

Beds – lounge beds, bead beds, water beds, day beds, overbed tables, bed lifters, bed boards, bed side rails if not an integral part of a hospital bed

Biofeedback, acupuncture, naturopathic services, faith healing, Christian Science services, hypnosis, massage treatment

Contact lenses for cosmetic purposes; bifocal contact lenses or oversized lenses, blended or progressive bifocal lenses, tinted or absorptive lenses (except for aphakia, albinism, glaucoma, medical photophobia), trifocal lenses (except as a specific job requirement), spare glasses. Also Orthoptic training is not a benefit.

Cosmetic surgery or treatment, reconstructive or plastic surgery to improve appearance and not bodily function, piercing of ears and other body areas, electrolysis, hair transplantation, reduction and augmentation breast surgery, panniculectomies and other body sculpturing procedures, excision or destruction of benign skin or subcutaneous lesions without medical justification

Dental services not primarily medical in nature (dental coverage is provided by the Medicaid fee-for-service program)

Drugs not approved by the U.S. Food and Drug Administration or deemed “less than effective” (DESI 5 or 6)

Elective abortions (ITOP)*

* Elective abortion (ITOP) is no longer a QUEST benefit but continues to be covered by the State of Hawaii under the Medicaid Fee-for-Service program. Please send claims for AlohaCare QUEST members who undergo elective termination of pregnancy directly to the State of Hawaii Medicaid Fee-For-Service claims processor.

Emergency facility services for non-emergencies

Experimental and investigational services, procedures, drugs, devices and treatments

Hansen’s Disease (leprosy) treatment or follow-up

In-vitro fertilization, reversal of sterilization, artificial insemination, sperm banking procedures, and drugs to test fertility

Non-medical items such as books, telephones, electronic transmitting and paging devices, radios, linens, televisions, computers, air conditioners, air purifiers, fans, household items and furnishings

Obesity treatment: weight loss programs, food, food supplements, health foods and prepared formulas, weight loss surgery.

Organ transplants not meeting the guidelines established by the Medicaid program and organ transplants not specifically identified as a Medicaid benefit. Effective 8/1/07, kidney transplantation is covered under the State of Hawaii Medicaid Fee-For-Service program.

Out-of-state non-emergency service for adults unless a medically necessary covered service is unavailable in Hawaii and AlohaCare makes the arrangements for the services to be provided on the mainland. Any services provided in a foreign country for children and adults

Penile and testicular prostheses and related services

Personal care items (including shampoo, toothpaste, denture cleansers, shoes or orthopedic footwear, slippers, clothing, laundry services, baby oils and powders, napkins, soaps, lip balms and band aids)

Physical examinations and immunizations for travel, domestic or foreign

Physical exams for your job when you are self-employed or as a requirement for continuing employment (i.e. truck and taxi driver’s licensing, other physical exam as a requirement for continual employment by the State or Federal Government, or by private business)
<table>
<thead>
<tr>
<th>Routine foot care and treatment of flat feet</th>
<th>Sex change operations and related medical, surgical and psychiatric services, drugs and hormones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services for an injury or illness caused by another person or third party from whom the enrollee has or may have a right to recover damages (AlohaCare will coordinate benefits after third party payment, up to our fee schedule amounts)</td>
<td>Smoking cessation classes and drugs which include use of hypnosis, acupuncture, biofeedback and nicotine drugs</td>
</tr>
<tr>
<td>Services payable under the terms of any other group or non-group health plan coverage (AlohaCare will coordinate benefits after other insurance payment, up to our fee schedule amounts)</td>
<td>Stand-by services by a stand-by physician, telephone consultation, telephone calls, writing of prescriptions, stat charges</td>
</tr>
<tr>
<td>Services payable under terms of worker compensation, automobile medical and no-fault, underinsured or uninsured motorist, or similar contract of insurance (AlohaCare will coordinate benefits after third party payment, up to our fee schedule amounts)</td>
<td>Swimming lessons, summer camp, gym membership</td>
</tr>
<tr>
<td>Services, procedures, equipment, supplies (whether specifically listed or not) that do not follow standard medical practice or which are not medically necessary</td>
<td>Topical application of oxygen</td>
</tr>
<tr>
<td>Sex and marriage counseling, employment counseling, primal therapy, long term character analysis, marathon group therapy, and consortium</td>
<td>Treatment of persons confined to public institutions (prison, state hospital)</td>
</tr>
<tr>
<td></td>
<td>Treatment of pulmonary tuberculosis (TB) if free treatment is available</td>
</tr>
<tr>
<td></td>
<td>Treatment of sexual dysfunction including medical and surgical procedures, supplies, drugs and equipment</td>
</tr>
<tr>
<td></td>
<td>Tuberculosis treatment, when treatment is available at no charge to the general public</td>
</tr>
</tbody>
</table>