

Off-site Health Benefits at Safe Havens

(Leesburg NCC)

BENEFITS GUIDE

Updated 2/23/2022

INTRODUCTION

The U.S. Committee for Refugees and Immigrants (USCRI) has been responding to the needs and advocating on behalf of refugees and immigrants since 1911. USCRI is funded by the Department of Health and Human Services, Office of Refugee Resettlement (HHS/ORR) to administer the Off-site Health Benefits at Safe Havens program. The health, prescription drug, and limited dental benefits are administered by Point Comfort Underwriters, Inc. (PCU).

The Off-site Health Benefits program provides select medical and pharmacy benefits when the care needed exceeds the level of care provided at Safe Haven clinics (e.g., ER visits, hospitalizations, specialty referrals). Benefits are available to those who are ineligible or unable to access other health coverage. Safe Havens are locations designated by the U.S. Government at which Afghan evacuees may complete their processing before being resettled in the community

OFF-SITE HEALTH BENEFITS AT SAFE HAVENS (Leesburg NCC)

Who is eligible for the Off-site Health Benefits program?

Afghans residing at Safe Haven Leesburg NCC with the following immigration statuses are eligible for benefits: Special Immigrant Visa holders (SIVs), SI/SQ Parolees, and other Humanitarian Parolees.

How to enroll?

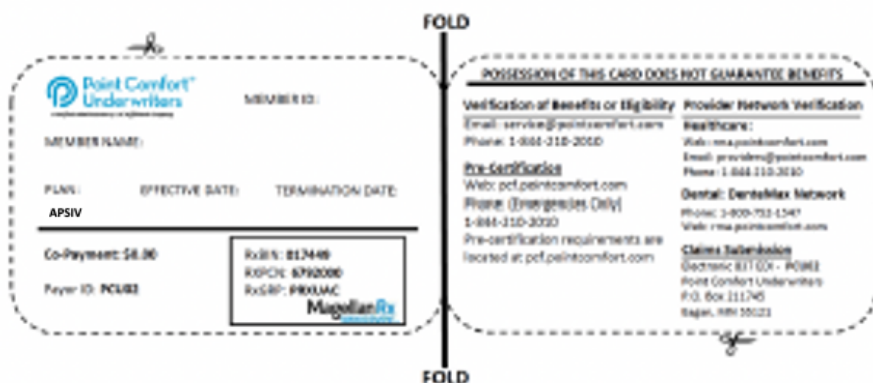
HHS/ORR, USCRI and PCU will facilitate mass enrollment of eligible Afghans at Safe Havens. No individual applications are needed. HHS/ORR, USCRI and PCU will also facilitate manual enrollment of Afghans in need of expediated care off-site.

How long is coverage available under the Off-site Health Benefits program?

Benefits terminate upon departure from the Leesburg NCC Safe Haven. Upon departure from Safe Havens, benefits will end. The Off-site Health Coverage ID card contains a placeholder termination date. Regardless of the "Termination Date" indicated on the ID card, benefits will be available until the individual departs the Safe Haven.

What is an Off-site Health Benefits Identification card?

PCU will generate personalized ID cards for individuals enrolled in the Off-site Health Benefits program. The ID card contains the member's name, member identification number, and other important information about benefits. All participants enrolled in the Off-site Health Benefits program are coded under the "APSIV" plan; this is not the RMA program. **Safe Havens must always ensure ID cards are presented to off-site providers every time participants obtain services.**



This is not the RMA program.

HEALTHCARE

Which healthcare service providers can participants use?

An in-network provider must be used for healthcare services including **hospitalizations** and **specialty referrals**.

If a specialist from outside the network is required, Safe Haven partners making the referral must contact PCU (providers@pointcomfort.com) so a reimbursement agreement can be established with the provider before the participant is seen for care. Prior to referring a provider to PCU, the Safe Haven partner should always—

1. Confirm availability of appointment within the desired timeframe, if the appointment itself cannot be scheduled, pending reimbursement agreement with PCU.
2. Confirm the provider will accept 100% of the Medicare Fee Schedule for reimbursement.
 - If the provider will accept that rate and has availability, notify PCU so a reimbursement agreement can be sent to the provider, along with the participant's information.
 - If the rate is an issue, provide PCU with a name, phone number, and email of the person responsible for discussing single case agreements.
3. The participant should NOT go to the appointment until a reimbursement agreement is established with the provider.

What healthcare services are included?

Many healthcare services are included when such services are medically necessary, subject to certain limitations. A list of included services follows:

HOSPITAL CHARGES

- Daily room and board and nursing services in a semi-private room or ward
- Daily room and board and nursing services in an Intensive Care Unit
- Use of operating, treatment and recovery rooms
- Dressings, sutures and other supplies routinely provided to inpatients
- Emergency Room treatment (must be an emergency)
- Prescription drugs provided while inpatient
- Radiology, laboratory and ultrasound services
- Physical therapy, occupational therapy and speech therapy while inpatient
- Professional services, including doctors

OUTPATIENT HOSPITAL/OUTPATIENT SURGICAL FACILITY SERVICES

- Professional services, including doctors
- Dressings, sutures and supplies routinely provided while outpatient

DOCTOR AND CLINIC VISITS

- Specialists
- Prenatal/maternity care
- Radiology,* laboratory and ultrasound services

*May be subject to pre-authorization

What healthcare services are not included? *

- U.S.-born newborn expenses
- Personal convenience items
- Telephone consultations or failure to keep a scheduled appointment
Any modification of the body made to improve psychological, mental, or emotional well-being
- Exercise programs, whether or not prescribed by a doctor
- Cosmetic or aesthetic procedures
- Treatment for infertility, impotency or any sexual dysfunction
- Services or supplies that are investigational, experimental or for research purposes
- Eye surgery to correct nearsightedness, farsightedness or astigmatism
- Biofeedback, recreational, sleep or music therapy
- Services performed or supplies provided by relatives or any person who residing with patient
- Services or supplies provided at no cost
- Accommodations or travel expenses
- Treatment to promote hair growth, whether or not prescribed by a doctor
- Treatment to prevent hair loss
- Treatment of sleep disorders
- Any supply or service that is not medically necessary or for which benefits, or payments are available under any other contract or policy
- Inpatient coverage is limited to 30 days, unless separated by 60 days from the last hospitalization
- Transportation, including emergency, non-emergency, and air evacuation

(Some exclusions do not apply for individuals under age 21. Contact PCU for additional information.)

*This is a partial list of exclusions

PRESCRIPTION DRUGS

Which pharmacy can members use?

Prescription drugs are provided through the [MagellanRx Management network of pharmacies](#). This network includes all major chains, such as Walmart and CVS, and many local chains and stores.

Which prescription drugs are not covered?

- Brand drugs when a generic equivalent is available
- Any prescription drug associated with an excluded healthcare expense
- Drugs that are available over the counter or without a prescription by a doctor
- Maximum prescription is 30 days

DENTAL

What dental services are covered?

- Emergency inpatient dental treatment necessary to resolve pain or prevent infection
- Emergency dental treatment resulting from an accident

What dental services are not covered?

Only the services listed are covered.

Which dentist can members use?

Members may use any dental service provider in the DenteMax network. A list of DenteMax providers can be found at www.dentemax.com/findadentist, or contact PCU for assistance. Only DenteMax providers are authorized to provide dental services. **Safe Havens must always ensure ID cards are presented to off-site providers every time members obtain services.**

PRE-CERTIFICATION

Pre-certification is not required for emergency treatment.

Which services must be pre-certified?

Many covered services requested by off-site providers must be pre-certified. That means approval from PCU must be obtained prior to treatment. The following must be pre-certified:

- Inpatient care
- Any surgery
- Care in an extended care facility
- Home health services (including infusions)
- Physical therapy*
- Occupational therapy
- Speech therapy
- Allergy testing
- Mental/Behavioral health care*
- Artificial limbs
- Prosthetic devices
- Computerized Tomography (CAT Scan) *
- Magnetic Resonance Imaging (MRI)*
- Human Organ/Tissue transplant
- Durable medical equipment
- Radiation therapy or treatment
- Chemotherapy
- Hemodialysis
- Oxygen and other gasses and their administration
- Anesthetics and their administration

How are services pre-certified?

If a service requires Pre-certification, off-site providers should contact PCU at RMAClinical@pointcomfort.com, by telephone and can be requested online at <https://pcfonline.pointcomfort.com/>. **Pre-certification is not required for emergency treatment; however, providers must pre-certify as soon as reasonably possible.**

*May be requested by on-site Safe Haven providers.

PCU SERVICE DIRECTORY

Questions concerning eligibility or coverage:

Service@pointcomfort.com

1-844-210-2010

Questions concerning providernetworks:

Medical & Dental:

Providers@pointcomfort.com

1-844-210-2010

rma.pointcomfort.com

Pre-certification:

RMAClinical@pointcomfort.com

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Claim Status:

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Appeals:

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