

**GATEWAY HEALTH PLAN<sup>SM</sup>**  
**MEMBER BENEFIT PACKAGES** (EFFECTIVE JANUARY 15, 2007)

<b>ADULT MEDICAL ASSISTANCE BENEFIT PACKAGES (1, 2, 4, 8, 10, 13,14)</b>			<b>ADULT GENERAL ASSISTANCE BENEFIT PACKAGES (3 &amp; 5)</b>		
<b>BENEFIT</b>	<b>COPAY*</b>	<b>COMMENT</b>	<b>BENEFIT</b>	<b>COPAY*</b>	<b>COMMENT</b>
Brand Name RX	\$3.00	Applicable to age 18 and older	Brand Name RX	\$3.00	Applicable to age 18 and older
Generic Drug RX	\$1.00	Applicable to age 18 and older	Generic Drug RX	\$1.00	Applicable to age 18 and older
Inpatient Hospital (General or Rehab)	\$3/per day, up to \$21/per admission	Applicable to age 18 and older	Inpatient Hospital (General or Rehab)	\$6/per day, up to \$42/per admission	Applicable to age 18 and older
Hospital Short Procedure Unit (SPU)	\$3/per service	Applicable to age 18 and older	Hospital Short Procedure Unit (SPU)	\$6/per service	Applicable to age 18 and older
Office Visits (Not applicable to PCPs, OBs, GYNs and OB/GYNs)	\$2/per visit	Applicable to age 18 and older and Federally Qualified Health Centers (FQHC)	Office Visits (Not applicable to PCPs, OBs, GYNs and OB/GYNs)	\$4/per visit	Applicable to age 18 and older and Federally Qualified Health Centers (FQHC)
Nuclear Medicine Services	\$1/per service	Applicable to age 18 and older and hospital component only	Nuclear Medicine Services	\$2/per service	Applicable to age 18 and older and hospital component only
Radiology Services	\$1/per service	Applicable to age 18 and older and hospital or physician office	Radiology Services	\$2/per service	Applicable to age 18 and older and hospital or physician office
<b>BENEFIT</b>	<b>LIMIT**</b>	<b>COMMENT</b>	<b>BENEFIT</b>	<b>LIMIT**</b>	<b>COMMENT</b>
Chiropractor and Podiatrist Outpatient Visits	18 combined outpatient visit limit/per year	Applicable to age 21 and older	Chiropractor and Podiatrist Outpatient Visits	18 combined outpatient visit limit/per year	Applicable to age 21 and older
Inpatient Medical Rehabilitation	1 inpatient medical rehab admission/per year	Applicable to age 21 and older	Inpatient Medical Rehabilitation	1 inpatient medical rehab admission/per year	Applicable to age 21 and older
			Inpatient Acute Hospital	1 inpatient acute admission/per year	Applicable to age 21 and older; not applicable to emergency admissions or admissions related to pregnancy
			Pharmacy	6 prescriptions or refills/per month	Applicable to age 21 and older

**\*Copayments do not apply to any member who is pregnant or in a nursing home. Not all prescription drugs have a copay. The pharmacy will inform the member of any applicable copay for a prescription. Members cannot be denied a service if they are unable to pay their copay.**

**\*\*The yearly limits refer to services rendered between January 15, 2007 and June 30, 2007. The yearly limits will start again on July 1 of every year. Providers or members may request an exception to approve services above the yearly limits.**