

Michigan - State Required Benefits

Benefit	Name of Required Benefit	Market Applicability	Citation Number
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	Breast cancer outpatient treatment servicest	HMO, Small Group	MB500.3406d; 550.1416
Hospice Services	Hospice care	HMO, Small Group	MB500.3406c; 550.1417
Home Health Care Services	Home health care services	HMO, Small Group	MB500.3519(3)
Emergency Room Services	Emergency room services	HMO, Small Group	MB500.3406k; 500.3519(3); 550.1418
Emergency Transportation/Ambulance	Emergency transportation/ambulance	HMO, Small Group	MB500.3406l; 500.3519(3)
Substance Abuse Disorder Outpatient Services	Substance abuse disorder outpatient	HMO, Small Group	MB550.1414a(1)
Substance Abuse Disorder Inpatient Services	Substance abuse disorder inpatient	HMO, Small Group	MB500.3425; 500.3519(3); 550.1414a(4)
Outpatient Rehabilitation Services	Breast cancer rehabilitation services	HMO, Small Group	MB500.3406d; 550.1416
Durable Medical Equipment	Mastectomy prosthetics	HMO, Small Group	MB500.3406a; 550.1415
Diagnostic Test (X-Ray and Lab Work)	Diagnostic tests	HMO, Small Group	MB500.3519(3)
Imaging (CT/PET Scans, MRIs)	Imaging	HMO, Small Group	MB500.3519(3)
Preventive Care/Screening/Immunization	Breast cancer diagnostic service	HMO, Small Group	MB500.3406d; 550.1416
Breast Reconstructive Surgery	Breast reconstructive surgery	HMO, Small Group	MB500.3406a; 550.1415
Mental Health Other	Mental health parity	HMO, Small Group	MB500.3406b; 550.1401b
Prescription Drugs Other	Antineoplastic surgery drugs	HMO, Small Group	MB500.3406e; 550.1416a